



COUNTY BOROUGH OF ROTHERHAM

REPORT
BY THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1964

ROTHERHAM:
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HEALTH COMMITTEE

MEMBERSHIP

(as at 31st December, 1964)

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(Chairman)

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(Vice-Chairman)

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COUNCILLOR MRS. S. M. CAMERON	
COUNCILLOR R. LOMAX	
COUNCILLOR D. LONG	
COUNCILLOR E. MANNS	

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	COUNCILLOR MRS. G. ROEBUCK
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(as at 31st December, 1964)

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COUNCILLOR MRS. J. JOHNSTON, J.P.	REV. G. HOLLIS

Director of Education:
R. BLOOMER, B.Com.

STAFF

(as at 31st December, 1964)

MEDICAL OFFICER OF HEALTH AND PRINCIPAL SCHOOL MEDICAL OFFICER :

R. J. Donaldson, M.B., Ch.B., D.P.H.

DEPUTY MEDICAL OFFICER OF HEALTH AND DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER :

J. M. Howell, M.B., B.S., M.R.C.S.,
L.R.C.P., D.C.H., D.P.H.

ASSISTANT MEDICAL OFFICERS OF HEALTH AND SCHOOL MEDICAL OFFICERS :

D. W. G. Brady, M.B., Ch.B.

Mary Jackson, M.B., Ch.B.

F. B. G. Wood, M.B., Ch.B.

PRINCIPAL DENTAL OFFICER :

H. R. Heald, L.D.S.

DENTAL OFFICERS :

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Joan H. Egan, B.D.S., L.D.S.

J. O. Lofthouse, L.D.S.

G. W. Lowe, L.D.S.

Joyce Stocks, L.D.S.

EDUCATIONAL PSYCHOLOGIST :

T. Lee, B.A.

CHIROPODIST (part-time) :

L. Aldam, M.Ch.S., S.R.Ch.

SPEECH THERAPIST :

Miss M. Wareing, L.C.S.T.

PHYSIOTHERAPIST (part-time) :

P. J. G. Nightingale, M.C.S.P.

CONSULTING STAFF (part-time) :

OPHTHALMOLOGY :

T. Stafford Maw, M.B., Ch.B., D.O.M.S.

D. B. Bannerjee, M.B., B.S., D.C.H.

N. M. Watters, M.B., Ch.B.

EAR, NOSE AND THROAT :

Romola D. Dunsmore, M.B., B.S.,
F.R.C.S.

PSYCHIATRY :

Rosalie B. Laidlaw-Becker, M.D.,
D.P.H., D.P.M. (Locum)

OBSTETRICS AND GYNAECOLOGY :

D. Ballantine, M.B., Ch.B., F.R.C.S.,
F.R.C.O.G., L.M.

TUBERCULOSIS :

A. C. Morrison, M.D., D.P.H.

ORTHODONTICS :

J. H. Gardiner, B.D.S., L.D.S. (Manch.)

ORTHOPAEDICS

H. L. McMullen, B.A., M.B., B.Chir.,
F.R.C.S.

PUBLIC ANALYST (part-time) :

H. Childs, B.Sc., F.R.I.C.

LAY ADMINISTRATIVE OFFICER :

G. H. Biggin

SENIOR CLERK :

G. T. Longden

MEDICAL OFFICER OF HEALTH'S SECRETARY :

Miss J. Caseldine

GENERAL OFFICE: CLERICAL STAFF :

Six Clerks

CHIEF PUBLIC HEALTH INSPECTOR :

L. Eastwood, M.A.P.H.I., A.M.Inst.P.C.,
(1), (2), (3), (4).

DEPUTY CHIEF PUBLIC HEALTH INSPECTOR :

T. E. Snape, M.R.S.H., (1), (2).

PUBLIC HEALTH INSPECTORS:

G. C. Harrison, M.A.P.H.I., (2).
W. James
K. Jones, M.A.P.H.I., (1), (4).
W. G. Smith, M.A.P.H.I., (1), (2).
(Three Vacancies)

PUBLIC HEALTH INSPECTOR'S SECTION:

Three Pupil Health Inspectors
Two Clerks
One Disinfector (one vacancy)
One Ratcatcher

QUALIFICATIONS :

- (1) Certificate, Meat and Other Foods Inspector
- (2) Certificate, Smoke Inspector
- (3) Testamur, Institute of Public Cleansing (Honours)
- (4) Building Construction Certificate

SUPERINTENDENT HEALTH VISITOR:

Miss E. G. Taylor, S.R.N., S.C.M.

DEPUTY SUPERINTENDENT HEALTH VISITOR:

Miss E. Keeton, S.R.N., S.C.M.

HEALTH VISITOR/SOCIAL WORKER:

(Vacant)

HEALTH VISITORS:

Miss C. M. Cullen, S.R.N., S.C.M.
Miss M. Fleming, S.R.N., S.R.F.N.,
S.C.M.
Mrs. R. McHugh, S.R.N., S.C.M.
Miss C. McLoughlin, S.R.N., S.C.M.
Mrs. A. B. Payling, S.R.N., S.C.M.
Mrs. G. J. Spearing, S.R.N., S.C.M.
Miss E. M. Jeffs, S.R.N., S.C.M.
(part-time)
(six vacancies)

SCHOOL NURSES:

Mrs. E. M. Catley, S.R.N.
Miss F. M. Clark, S.R.N.
Mrs. M. Gaskell, S.R.N., S.C.M.
Mrs. E. A. S. Hoyle, S.R.N., S.C.M.
Mrs. M. Hunton, S.R.N.
Mrs. M. Leeson, S.R.N., S.C.M.

PREMATURE BABY NURSE:

Mrs. M. Mossman, R.S.C.N.

CLINIC NURSES:

Miss S. Greenway, S.R.N.
Mrs. M. Measures, S.R.N.
Mrs. F. M. Buxton, S.R.N. (part-time)
Mrs. A. Ketton, S.R.N. (part-time)
Mrs. J. Marshall, S.R.N. (part-time)
Mrs. V. Pingree, S.R.N. (part-time)
Mrs. M. Tidy, S.R.N., R.F.N., Q.N.
(part-time)
Mrs. M. G. Wright, S.R.N., S.C.M.
(part-time)

MATERNITY AND CHILD WELFARE SECTION:

SENIOR CLERK:

Miss N. H. Platts
Seven Clerks

WELFARE FOOD SHOP:

One Shop assistant (full-time)
Three Shop assistants (part-time)

SCHOOL HEALTH SECTION:

SENIOR CLERK:

Miss W. M. Cooper
Five Clerks
One Dental Clerk
Five Dental Attendants
Two Dental Technicians

HOME NURSING SERVICE:

SUPERINTENDENT:

Miss V. M. McCarthy, S.R.N., S.C.M.,
Q.N.

DEPUTY SUPERINTENDENT:

Miss B. M. Colton, S.R.N., S.C.M., Q.N.
Eighteen Nurses (full-time)
Five Nurses (part-time)
(four vacancies)

HOME HELP SERVICE:

HOME HELP ORGANISER AND
GERIATRIC SOCIAL WORKER:

Mrs. R. E. Wales, M.I.H.H.O., A.I.S.W.

DEPUTY HOME HELP ORGANISER:

Mrs. G. Stevenson, M.I.H.H.O.
186 Home helps (part-time)
Five Visitors (full-time)
One Visitor (part-time)

OCCUPATIONAL THERAPIST:

Mrs. K. Birkinshaw

SENIOR CLERK:

(Vacant)
Three Clerks
Three Clerks (part-time)

DISTRICT MIDWIVES SERVICE:

NON-MEDICAL SUPERVISOR OF MIDWIVES:

Mrs. I. McGann, S.R.N., S.C.M.

ASSISTANT TO NON-MEDICAL SUPERVISOR OF MIDWIVES:

Mrs. G. Hewitt, S.R.N., S.C.M.

DISTRICT MIDWIVES:

Mrs. P. M. Abbott, S.R.N., S.C.M.
Mrs. R. Addison, S.C.M.
Miss E. Atkinson, S.R.N., S.C.M.
Mrs. H. M. Clarke, S.R.N., S.C.M.
Mrs. P. J. Cloke, S.R.N., S.C.M.
Mrs. N. Edwards, S.C.M.
Mrs. B. Ellis, S.C.M.
Mrs. P. M. Fox, S.R.N., S.C.M.

DISTRICT MIDWIVES—*contd.*:

Mrs. E. Hawley, S.C.M.
Mrs. M. Hughes, S.C.M.
Miss E. D. Jeyes, S.C.M.
Mrs. J. M. Rowan, S.C.M.
Miss B. D. Walker, S.R.N., S.C.M.
Mrs. G. L. Willoughby, S.C.M.

MENTAL HEALTH OFFICER:

W. R. Sidaway, D.M.H.

ASSISTANT MENTAL HEALTH OFFICERS:

N. Kell, S.R.N., R.M.N.
P. Kirby
Miss G. Calam, Mental Health Social Worker

JUNIOR AND ADULT TRAINING CENTRES:

HEAD TEACHER:

Miss E. Kelford

DEPUTY HEAD TEACHER:

Mrs. F. Crossley

JUNIOR TRAINING CENTRE:

Two Assistant teachers (female)

ADULT TRAINING CENTRE:

Two Assistant teachers (male)
Two Assistant teachers (female)

HEALTH DEPARTMENT,
MUNICIPAL OFFICES,
ROTHERHAM.

Telephone 2121.

TO THE CHAIRMEN AND MEMBERS OF THE HEALTH AND EDUCATION
COMMITTEES OF THE COUNTY BOROUGH OF ROTHERHAM

I have pleasure in submitting the report on the health of Rotherham for 1964.

The estimated mid-year population of the County Borough was 86,510. The birth rate per thousand population for the year was 19.77 compared with 19.2 in 1963 and the death rate was 10.73 compared with 11.24 in 1963.

Thirty-seven infants under one year died in the County Borough during the year and 20 of these were premature babies, the infantile mortality rate being 21.62 as compared with 27.04 in 1963.

The Offices, Shops and Railway Premises Act, 1963, which came into force during the year, is dealt with in detail in the report and this long awaited piece of legislation is a welcome addition to the powers to improve working environment.

There were 720 cases of measles notified as compared with 2,112 in the previous year. No deaths occurred from the disease and 7 cases were treated in hospital. There was a decrease in the number of cases of scarlet fever notified, 95 cases as compared with 124. Three cases of food poisoning were notified and 2 received treatment in hospital. There were 33 cases of puerperal pyrexia as against 40 in 1963, and 47 cases of whooping cough were notified, as against 191 in 1963, 4 cases being admitted to hospital. There was no case of acute poliomyelitis during the year.

B.C.G. vaccination against tuberculosis was continued to the 13 plus age group. Of 1,311 children of this age attending school in the County Borough, consent was received from the parents of 1,120, an acceptance rate of 85.4 per cent. As a result of the Mantoux tests 725 children were subsequently vaccinated during the year with B.C.G. The percentage of children tested who were positive was 18.0 per cent and 162 children received B.C.G. vaccination in 1964 under the B.C.G. scheme for contacts. Of these, 40 were done during their stay in Listerdale Maternity Home, the remainder were given at the Chest Clinic. Two babies were admitted to Oakwood Grange Nursery for a period of isolation following B.C.G. vaccination. Some 5,700 doses of Sabin oral poliomyelitis vaccine were administered by the end of the year.

The 647 maternity cases delivered on the district represented 37.9 per cent of the total confinements for the County Borough. Although there were 65 fewer home confinements there was an increase in the number of nursing visits carried out by the domiciliary midwives due to the early discharge of mothers from hospital. The Non-Medical Supervisor of Midwives or her deputy visit the hospital maternity units daily to get first hand information about mothers and babies who are due for discharge. This close liaison and personal contact has proved most valuable.

The new clinic at Kimberworth Park was brought into use at the end of the year under review and this provides a very important addition to the facilities for clinic sessions in the town.

Of the various aspects of the work of the health visitor probably it is the task of looking after problem families which presents the most difficulty. The problem family presents difficulties which often appear to be insurmountable. The common picture is a large family with poor hygiene conditions, little or no food in the house, the family in debt and, in a small number of cases, no electricity or gas supply usually because of non-payment. The work done for these families is up-hill and unrewarding and, in spite of efforts made, the results are often poor and disappointing. One of the most commonly recurring features of this problem is the mother who is unable to cope with a large young family, yet when traditional methods of birth control are advised they are usually ignored and even the oral contraceptive is forgotten by the bewildered mother in a disorganised household. It is for this reason that in co-operation with the family doctor the intra-uterine contraceptive device has been used on a number of these cases and it is hoped that this will prove much more satisfactory.

During 1964 2,025 cases were nursed by the Home Nursing Service, which is 39 less than the previous year, and a total of 78,320 visits were paid to these patients, which represents an average of 214 daily visits paid to sick people by home nurses during the year. The Children's Nursing Unit attended 124 cases, which was a decrease of 69 cases.

The trend that has been evident in the last few years shows that the number of patients nursed decreases but that the volume of visits still remains the same. This reflects the change in the type of case cared for by the home nurses in which old people and the chronic sick have become the main burden.

Enquiries and visitors from other authorities expressing interest in the sterile supply service for the home nurses and midwives have continued during the year. This service has much to commend it because the "bake and boil" method is unsatisfactory and antiquated, and the nurse on the district should not be expected to carry out domestic chores which are totally unrelated to modern sterilising techniques.

Like the Home Nursing Service, the main effort of the Home Help Service continues to be diverted to the care and support of the old people living in the community. This is an important and vital task in the care of the community today. Old people want to stay at home and it is important that they should be allowed to do so for as long as possible. In this connection the work of the home help is supplemented by the chiropody service and occupational therapy service as well as the now well established domiciliary meals service for the old people living alone, and the washing centre which provides such very valuable help. The training course for home helps continued and this has proved most successful in enabling the home help to realise the full extent of her duties.

The completion of the Mental Health Hostel for the younger mentally disordered persons marked a great advance in the service provided by this Authority. The criteria for admission to the hostel are that the person should be suitable for reintegration into the community and capable of being taught to hold down a job. Close co-operation with the Welfare Department in the administration of the hostel has proved to be a great success. The transfer of the Junior Training Centre to larger premises has given scope for a much wider field of activities and now training is based on modern concepts with obviously greater benefits to the trainees. In the senior centre which is in temporary accommodation the interesting activity is the packing of sterile supplies. This has been done with a speed and efficiency which one would have thought was outside the scope of people with such limited intelligence.

The number of children excluded from school with infestation of their hair was more than three times as high as in the previous year (2,895 in 1964 as compared with 879 in 1963). The explanation of this is that it was realised that the level of infestation was increasing in certain schools and a new approach was adopted. Two members of the nursing staff simultaneously examined each child under a good light and all children whose hair contained nits or lice were excluded, however mild the infestation. These measures have induced hostility and bitterness, particularly amongst parents whose children have been excluded for a minor degree of infection. This is a pity because the children we are particularly trying to protect are those who through no fault of their own parents suffer infestation by associating with children from heavily infected families. The pattern is, however, now becoming clear that a small number of families constitute main reservoirs of infection and it is these families who are to receive closer scrutiny.

An account of the multiple screening clinic held during November and using five tests is given in the report. Measured by public response this was most successful. With a relatively new enterprise of this sort, however, a number of problems arise, one of which is that the patient, having successfully completed the tests, emerges with what he imagines is a clean bill of health. Though we tried hard to dispel this attitude it

is difficult to impress on each individual that a negative result does not necessarily imply the absence of other diseases, either at the time of the test or in the future.

It is intriguing to consider the attitude of the public to disease. The publicity as a result of the outbreak of typhoid in Aberdeen during the spring and summer of 1964, attributed to infected corned beef from the Argentine, resulted in a dramatic reduction in the sale of corned beef irrespective of the country of origin. During the epidemic one local shopkeeper offered free of charge a freshly opened six pound tin of Australian corned beef to a customer for his dog. The offer was firmly refused! This illustrates the impact upon public opinion of an epidemic 500 miles away, in which no one died directly from typhoid, and which has resulted in a drastic and still existing reduction in the sale of corned beef. On the other hand, in spite of authoritative reports that cigarette smoking is one of the main causes of the rising annual death rate from lung cancer there has been no consequent reduction in the sale of cigarettes. One can only be puzzled and despondent.

The last paragraph in this introduction is always devoted to acknowledgments and thanks to various people for their help throughout the year. Repetition, however, in this case does not denote insincerity. One must acknowledge first of all the consistent work done by members of this Department and the help received from other Corporation Departments. In the case of the School Health Service particular mention should be made of the close working arrangement there is with the Education Department. We are most grateful for the continued close liaison with the general medical practitioners and hospital staff. The occasion also gives the opportunity to thank the Chairmen and members of the Health and Education Committees for their help and guidance at all times, both in committee and outside it.

R. J. DONALDSON,

Medical Officer of Health and Principal School Medical Officer.

STATISTICS OF THE AREA

GENERAL STATISTICS

Area (in acres)	..	..	..	..	..	..	..	..	..	9,255
Population (census) 1961	..	..	..	..	..	..	..	..	..	85,346
Population (estimated civilian) 1964			..	..	..	..	..	..	..	86,510
Number of inhabited houses	..	..	..	..	..	..	..	..	..	28,461

VITAL STATISTICS

Live Births (877 Male, 834 Female)	..	..	..	..	..	..	..	..	1,711
Live birth rate per 1,000 population	..	..	..	..	..	..	..	..	19·77
Adjusted birth rate per 1,000 population (area comparability factor 0·99)	..	..							19·57
Illegitimate live births per cent of total live births	..	..	..	..	..	..	..	..	5·79
Still Births	..	..	..	..	..	..	..	..	29
Still birth rate per 1,000 live and still births	..	..	..	..	..	..	..	..	16·66
Total live and still births	..	..	..	..	..	..	..	..	1,740
Infant deaths (Deaths under 1 year)	..	..	..	..	..	..	..	..	37
Infant Mortality Rate per 1,000 live births—Total	..	..	..	..	..	..	..	..	21·62
„ „ „ „ „ „ —Legitimate	..	..	..	..	..	..	..	..	21·09
„ „ „ „ „ „ —Illegitimate	..	..	..	..	..	..	..	..	30·33
Neo-natal Mortality Rate (Deaths under 4 weeks per 1,000 total live births)	..	..							16·95
Early Neo-natal Mortality Rate (Deaths under 1 week per 1,000 total live births)	..								15·78
Perinatal Mortality Rate (Still births and deaths under 1 week combined per 1,000 total live and still births)	..	..	..	..	..	..	..	..	32·18
Maternal Mortality (including abortion)	..	..	..	..	..	..	..	..	1
Maternal mortality rate per 1,000 live and still births	..	..	..	..	..	..	..	..	0·57
Deaths (486 Male, 442 Female)	..	..	..	..	..	..	..	..	928
Death rate per 1,000 population	..	..	..	..	..	..	..	..	10·73
Adjusted death rate per 1,000 population (area comparability factor 1·19)	..	..							12·76

The following table gives details of birth rate, death rate, infantile mortality rate and estimated population during the last 50 years.

Year	Birth Rate	Death Rate	Infantile Mortality Rate	Estimated Population
1915	28.02	17.13	129	65,300
1916	27.60	15.55	130	65,300
1917	24.79	13.90	97	65,300
1918	24.91	19.61	132	65,300
1919	22.75	13.19	91	72,800
1920	27.77	11.45	100	72,800
1921	28.54	13.13	86	68,045
1922	25.45	12.06	86	69,100
1923	23.85	11.30	100	70,000
1924	23.88	12.75	96	70,260
1925	22.27	11.74	83	70,300
1926	21.82	10.34	65	70,600
1927	20.76	13.46	90	70,080
1928	19.05	10.58	71	70,530
1929	20.01	12.13	83	70,790
1930	18.72	10.50	74	70,390
1931	18.18	12.03	92	70,130
1932	18.11	11.15	70	69,820
1933	16.53	12.06	84	69,370
1934	17.30	10.30	49	68,900
1935	17.01	11.53	69	68,700
1936	16.98	11.98	71	74,965
1937	16.99	11.42	50	75,740
1938	17.82	10.54	52	76,430
1939	16.88	10.86	53	76,960
1940	18.01	12.39	62	75,740
1941	17.86	11.43	66	75,770
1942	18.08	10.31	50	75,040
1943	18.81	12.12	65	74,250
1944	23.28	11.68	60	75,260
1945	20.09	11.73	56	75,630
1946	22.49	10.96	51	78,610
1947	23.87	10.86	57	79,920
1948	20.11	10.50	70	81,450
1949	18.69	10.63	53	82,030
1950	17.44	10.33	50	82,800
1951	17.61	11.91	28	81,670
1952	16.25	10.46	32	81,800
1953	16.16	10.10	32	82,070
1954	16.50	10.68	22	82,260
1955	16.02	11.00	26	82,530
1956	17.22	10.58	24	82,850
1957	16.95	10.83	25	83,350
1958	18.04	11.20	22	84,030
1959	17.35	11.08	21	84,560
1960	18.31	10.96	20	85,070
1961	18.12	11.14	30	85,440
1962	18.80	11.76	28	86,220
1963	19.20	11.24	27	86,660
1964	19.77	10.73	22	86,510

In the following table the causes of death at different periods of life, as supplied by the Registrar-General, with death rates, are given for the year :

Cause of Death	Sex	Total All Ages	Under four weeks	Four weeks and under one year	Age in Years										Death Rate per 1,000 Pop.
					1-	5-	15-	25-	35-	45-	55-	65-	75-		
1. Tuberculosis, respiratory	M	1	—	—	—	—	—	—	—	—	—	—	—	1	0.01
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	
3. Syphilitic disease ..	M	1	—	—	—	—	—	—	—	—	1	—	—	—	0.01
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	
9. Other infective and parasitic diseases ..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	
10. Malignant neoplasm, stomach ..	M	14	—	—	—	—	—	—	1	4	3	5	1	—	0.32
	F	14	—	—	—	—	—	—	—	1	—	4	9	—	
11. Malignant neoplasm, lung bronchus ..	M	31	—	—	—	—	—	—	3	6	9	11	2	—	0.46
	F	9	—	—	—	—	—	—	1	—	3	4	1	—	
12. Malignant neoplasm, breast ..	M	1	—	—	—	—	—	—	—	—	—	—	1	—	0.12
	F	10	—	—	—	—	—	—	—	3	1	5	1	—	
13. Malignant neoplasm, uterus ..	F	6	—	—	—	—	—	—	—	1	—	4	1	—	0.07
14. Other malignant and lymphatic neoplasms	M	53	—	—	—	—	1	—	1	7	15	11	18	—	
	F	39	—	—	—	—	1	—	4	7	6	7	14	—	1.06
15. Leukaemia, aleukaemia	M	3	—	—	—	—	—	1	—	—	—	—	1	—	
	F	6	—	—	—	—	—	—	2	1	—	—	1	—	0.10
16. Diabetes ..	M	2	—	—	—	—	—	—	—	—	—	—	—	1	
	F	6	—	—	—	—	—	—	—	—	—	1	3	2	0.09
17. Vascular lesions of nervous system ..	M	56	—	—	—	—	—	—	4	7	6	12	27	—	
	F	75	—	—	—	—	—	—	—	2	8	26	39	—	1.52
18. Coronary disease, angina ..	M	101	—	—	—	—	—	—	2	13	25	34	27	—	
	F	71	—	—	—	—	—	—	1	3	9	28	30	—	1.99
19. Hypertension with heart disease ..	M	5	—	—	—	—	—	—	—	—	4	1	—	—	
	F	6	—	—	—	—	—	—	—	—	—	2	4	—	0.13
20. Other heart disease	M	29	—	—	—	—	—	—	—	3	5	4	17	—	
	F	51	—	—	—	—	1	—	2	—	7	12	29	—	0.93
21. Other circulatory disease	M	21	—	—	—	—	—	—	—	—	2	3	16	—	
	F	41	—	—	—	—	—	—	—	—	—	5	36	—	0.72
22. Influenza ..	M	1	—	—	—	—	—	—	—	—	—	1	—	—	
	F	1	—	—	—	—	—	—	—	—	—	—	1	—	0.02
23. Pneumonia ..	M	23	3	2	—	—	—	—	1	2	1	5	9	—	
	F	21	—	1	—	—	—	—	1	—	2	4	13	—	0.51
24. Bronchitis ..	M	45	—	—	—	—	—	—	—	2	13	15	15	—	
	F	23	—	—	—	—	—	—	—	2	3	6	12	—	0.79
25. Other diseases of respiratory system ..	M	11	—	2	1	—	—	—	1	2	1	2	2	—	
	F	5	—	2	1	—	—	—	—	—	—	1	1	—	0.19
26. Ulcer of stomach and duodenum ..	M	8	—	—	—	—	—	—	2	—	—	5	1	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	0.09
27. Gastritis, enteritis and diarrhoea ..	M	2	—	1	1	—	—	—	—	—	—	—	—	—	
	F	5	—	—	—	—	—	1	1	2	—	—	1	—	0.08
28. Nephritis and Nephrosis	M	1	—	—	—	—	—	—	—	—	—	1	—	—	
	F	2	—	—	—	—	—	—	—	—	—	—	1	1	0.04
29. Hyperplasia of prostate	M	2	—	—	—	—	—	—	—	—	—	—	1	1	
31. Congenital malformations	M	3	2	—	—	—	1	—	—	—	—	—	—	—	0.07
	F	3	2	—	—	—	—	—	1	—	—	—	—	—	
32. Other defined and ill- defined diseases ..	M	38	16	—	—	3	—	1	—	3	3	5	7	—	0.80
	F	31	6	—	—	—	1	1	—	—	1	8	14	—	
33. Motor vehicle accidents	M	15	—	—	—	—	3	3	1	3	1	—	4	—	0.22
	F	4	—	—	—	—	—	—	—	1	—	3	—	—	
34. All other accidents ..	M	12	—	—	—	1	—	2	3	—	1	2	3	—	0.25
	F	10	—	—	—	—	1	—	—	3	1	—	5	—	
35. Suicide ..	M	7	—	—	—	—	—	—	1	2	2	1	1	—	0.12
	F	3	—	—	—	—	—	—	—	—	1	1	1	—	
Total all causes ..	M	486	21	5	3	5	4	7	20	55	93	118	155	—	10.73
	F	442	8	3	2	1	4	2	13	26	43	124	216	—	

INFANTILE MORTALITY.

The following table gives details of the deaths registered during the year which were under one year of age :—

R.G's Code No.	Cause of death	Under 1 day	1 day	2 days	3 days	4 days	5 days	6 days	7-13 days	14-20 days	21-28 days	Total under 4 wks	4 wks to 3 mths	3-5 mths	6-8 mths	9-11 mths	Total under one year
9	Other infective and parasitic diseases	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
20	Other heart disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
23	Pneumonia	-	-	1	-	-	-	-	-	-	-	1	5	-	-	-	6
24	Bronchitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
25	Other diseases of respiratory system	1	-	1	1	-	-	-	-	-	-	3	1	-	-	-	4
27	Gastritis, En- teritis and Diarrhoea	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
31	Congenital malformations	-	1	1	-	-	-	-	-	1	-	3	-	-	1	-	4
32	Other defined and ill-defined diseases	14	4	2	1	-	-	-	-	1	-	22	-	-	-	-	22
		15	5	5	2	-	-	-	-	2	-	29	7	-	1	-	37

CANCER

The following table gives the localisation of the disease, the number of deaths and the death rate per 1,000 population annually for the past ten years :—

	1955		1956		1957		1958		1959		1960		1961		1962		1963		1964	
	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate
Stomach and duodenum	18	0.22	23	0.28	19	0.23	27	0.32	26	0.31	18	0.21	24	0.28	28	0.32	18	0.21	28	0.32
Lung, bronchus	29	0.35	35	0.42	34	0.41	41	0.49	31	0.37	59	0.69	47	0.55	42	0.49	46	0.53	40	0.46
Breast	10	0.12	11	0.13	14	0.17	13	0.16	17	0.20	15	0.18	19	0.22	14	0.16	17	0.20	11	0.13
Uterus	4	0.05	1	0.01	7	0.08	7	0.08	15	0.17	7	0.08	7	0.08	4	0.05	4	0.04	6	0.07
Other sites	72	0.87	87	1.05	90	1.08	89	1.05	87	1.03	82	0.96	73	0.85	78	0.90	88	1.01	92	1.06
Total deaths and death rates from cancer	133	1.61	157	1.89	164	1.97	177	2.10	176	2.08	181	2.12	170	1.99	166	1.92	173	1.99	177	2.04
Total deaths and death rates all causes	908	11.00	877	10.58	903	10.83	941	11.20	937	11.08	932	10.96	952	11.14	1014	11.76	974	11.24	928	10.73
Proportion, cancer deaths to total deaths, - 1 in	6.83		5.59		5.51		5.32		5.32		5.15		5.6		6.11		5.63		5.24	

ENVIRONMENTAL HEALTH

Constant repetition of difficulties can become irritating ; so the briefest reference is made to the fact that, for most of the year, we had only half our establishment of district public health inspectors and were unable to obtain more. The appointment of a technical assistant to the public health inspectors for smoke control work will enable us to proceed with the establishment of further areas in more regular progression.

The Offices, Shops and Railway Premises Act, which came into force on 1st August, 1964, is dealt with in detail in the report, and this long awaited legislation is a welcome addition to the powers for improving **unsatisfactory conditions in the environment.**

It is now nearly twenty years since the last war. During this time most of the communal air raid shelters throughout the town have been accumulating rubbish. Action was taken a few years ago to clean out and brick up some of the shelters but many remain, most of them in a deplorable condition. Any derelict structure, over a period of time, tends to become a dumping ground. It would be easy to moralise and say that people should not do this, the fact remains that they do. Buildings should be used or demolished or they will be misused. It is quite impossible to discover the source of the rubbish or to take any effective action against the culprits. In addition to the nuisance arising from the rubbish they contain the shelters restrict yard and air space, interfere with the drying of clothes and in every way are a source of inconvenience to the occupants of the houses they were intended to serve. Their usefulness as shelters must now be limited and one can only assume that the reason for the continued presence of these obstructions is a reluctance to face the cost of their removal, by the authority concerned. A planned programme for the demolition of these sources of nuisance is long overdue.

It is said that the British are animal lovers. All domestic animals, including human beings, may be carriers of food poisoning organisms and care in the disposal of their excreta is an essential part of an urban environment. One of the reasons for the low expectation of life a century ago was a lack of sanitation. Today we have an expensive water carriage system of sewage disposal, we spend a great deal of time and money in the prevention of outbreaks of food poisoning by an insistence on improved methods of food handling and cleanliness of premises. It seems absurd, in these circumstances to allow our environment to be polluted unnecessarily. It is appreciated that the continuous erosion by buildings of open country available to town dwellers adds to the problem of dog owners, but this is no excuse for the use of public places as animal conveniences. A situation which leads to footwear and even children's

clothing being contaminated and then brought into our homes is inexcusable. This is not intended to be an indictment of all dog owners. There are many well trained and cared for animals which cause no nuisance to anyone. To achieve this requires an acceptance of the fact that keeping a pet imposes obligations which demand both time and patience. The fouling of footpaths and grass verges in our residential areas by dogs on or off the lead is an eyesore and gross nuisance which should cease.

WATER

47 samples of drinking water and 15 samples of swimming bath water were taken for examination. One sample of swimming bath water was unsatisfactory, to which the attention of the Baths Manager was drawn.

4 samples taken from the paddling pool in Clifton Park in June, July and August, were all satisfactory and revealed adequate chlorination.

SANITARY ACCOMMODATION

(a) HOUSE DRAINAGE.

2,323 visits were made in connection with drain tests, defective drains and drainage appliances.

The Building Works Department cleared 11 private drains and repaired one sewer involving thirteen houses at our request and costs were recovered from the owners concerned. This together with the clearing service provided by the Borough Engineer for those combined drains, which are now technically sewers, enables us to reduce nuisance from this source very substantially.

(b) STANDARD GRANTS.

The sixth year of operation of the Standard Grant provisions of the House Purchase and Housing Act, 1959, produced 160 enquiries from prospective applicants. Of these, 114 applied for grants and 111 of these were approved during the year, one was deferred. Details are as follows :

Grant approved	..	..	..	..	..	111
(owner occupiers)	..	..	..	..	..	96
(landlords)	..	..	..	..	..	15
Grants refused	..	..	..	..	..	2
Works completed and grant paid	..	..	..	..	..	107
Total grant	..	..	..	..	£9,134 4s. 9d.	
Amenities provided						
Bath..	..	..	..	..	..	72
Washbasin	..	..	..	..	..	83
Hot water supply	..	..	..	..	..	71
Water closet	..	..	..	..	..	89
Food Store	..	..	..	..	..	—

The Housing Act, 1964, contains some useful amendments of the Standard Grant provisions. The upper limit of grant is increased in certain instances to £350 to include building of a new structure and other major works. Professional fees may now be included in costs.

It is unfortunate that other amendments (the separation of hot water costs for each fitting) to allow the provision of reduced amenities, affect adversely the applicant wishing to divide a bedroom to form a bath room. If the applicant already has a hot water geyser over the sink, his maximum grant for bath, washbasin, water closet and hot water supply is reduced to £120. This is less than half the cost of some of these conversions.

(c) LICENSED PREMISES, CINEMAS.

27 inspections were made of the sanitary accommodation at licensed premises and cinemas.

Sanitary accommodation cleansed	..	..	..	1
Washbasins provided	..	..	..	1
Intervening ventilated space to water closets provided..				3

FACTORIES

53 factory inspections were made as follows :

Premises	Number on Register	Number of		
		Inspec- tions	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	39	1	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	305	53	1	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	2	—	—	—
Total ..	346	54	1	—

Factories in which defects were found :

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness	—	—	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable temperature ..	—	—	—	—	—
Inadequate ventilation	1	1	—	1	—
Ineffective drainage of floors ..	—	—	—	—	—
Sanitary Conveniences					
(a) Insufficient	—	1	—	1	—
(b) Unsuitable or defective ..	2	7	—	1	—
(c) Not separate for sexes ..	—	1	—	—	—
Total ..	3	10	—	3	—

OUTWORKERS

One outworker carrying out alterations to clothing was notified in Rotherham during the year.

OFFENSIVE TRADES

No complaints of nuisance were received in connection with the 5 offensive trades now registered.

CANAL BOATS

Canal boats inspected	3
Persons on board :	
Male adults	6
Female adults	—
Cases of infectious disease ..	—
Infringements observed	—
Notices served	—
Notices complied with	—
Notices outstanding	—
Legal proceedings taken	—

HOUSING

(a) NUISANCE AND DISREPAIR.

928 complaints of nuisance and disrepair were received during the year. 1,671 houses were involved in the total nuisances found as a result of complaints or during inspection of the district.

No applications for certificates under the provisions of the Rent Act, 1957, were received.

(b) DEMOLITION AND CLOSURE.

7 clearance areas involving 58 houses were declared during the year. 7 individual unfit houses were the subject of closing or demolition orders.

Two Public Inquiries were held to consider objections to five Compulsory Purchase Orders. The Orders were confirmed without modification by the Minister after consideration of the report of the Inspectors.

(c) HOUSE PURCHASE.

Many enquiries are still being received from would-be house purchasers requiring information as to the slum clearance position of individual houses. 200 such enquiries were dealt with.

284 houses were visited in connection with applications for mortgages to ensure that the period of repayment and probable life of the house were properly related.

(d) IMPROVEMENT AREAS.

The provisions of Part II of the Housing Act, 1964, relating to improvement areas should give a much needed acceleration to the process of repair and improvement of rented property with a reasonable life. The older industrial towns are already heavily involved in the renewal of town centres, in the replacement of inadequate road systems and in the clearance of slum property.

The declaration of improvement areas, requiring the repair of substantial numbers of houses together with the installation of bathrooms may seem to be a difficult undertaking in these circumstances. An already fully occupied building labour force might find a programme of this type difficult to absorb. Nevertheless, if the modernisation of the older towns is to proceed in an orderly fashion, improvement areas should be given an appropriate place in the scheme. Satisfactory urban renewal depends upon the co-ordination of clearance, improvement and redevelopment.

SUMMARY OF HOUSING ACTION

1. Inspection of dwelling houses:

(1) Number of houses inspected for housing defects under Public Health or Housing Acts	415
(2) Number of houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations	46
(3) Number of houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	46
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found to be not in all respects reasonably fit for human habitation	369

2. Remedy of defects during the year without service of formal notice:

(1) Number of dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers (including houses with minor defects)	284
--	-----

3. Action under statutory powers:

A. Proceedings under Section 9 and 10 of the Housing Act, 1957.

B. Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which formal notices were served requiring defects to be remedied	150
(2) Number of dwelling houses in which defects were remedied after service of formal notices :	
(a) By owners	85
(b) By Local Authority in default of owners	1

C. Proceedings under Sections 16, 17 and 18, Housing Act, 1957.

(1) Number of dwelling houses in respect of which demolition orders were made	2
(2) Number of dwelling houses in respect of which closing orders were made	-
(3) Number of individual unfit houses demolished	5
(4) Number of dwelling houses in respect of which undertakings as to future user were accepted and which ceased to be used as dwellings	-
(5) Number of houses included in clearance or compulsory purchase orders	58
(6) Number of houses included in confirmed clearance or compulsory purchase orders demolished	114
(7) Number of local authority houses closed or demolished	1

DETAILS OF LEGAL PROCEEDINGS UNDER THE PUBLIC HEALTH ACT, 1936

Case No.	Date	Default or offence	Result	Penalty
1	22.10.64	Non-compliance with Notice under Section 45	Withdrawn, work done	—
2	3.11.64	Non-compliance with Notice under Section 45	Fined	£5
3	10.11.64	Non-compliance with Abatement Notice	Nuisance Order made	—

HOUSES IN MULTIPLE OCCUPATION

The Housing Act, 1964, eliminated some of the weaknesses in previous legislation concerning this type of premises. It is now an offence not to comply with a notice requiring the provision of additional facilities. One prosecution under these powers resulted in a fine of £25 on the person having control of the premises. A number of notices were served requiring the provision of additional facilities and we are endeavouring to ensure that this type of house does not become the serious problem that it represents in many towns.

CARAVANS

The number of caravans in the County Borough is now fairly constant. Licences have been issued as follows:

Licences issued	Total caravans
for 1 caravan — 8	8
„ 2 caravans— 7	14
„ 4 „ — 2	8
„ 5 „ — 1	5
„ 9 „ — 1	9
„ 12 „ — 1	12

VERMINOUS PREMISES

864 inspections of Corporation houses and the houses of prospective tenants were made. Evidence of vermin was found on 7 occasions. Similar inspections were made of the effects of 3 families offered tenancies of houses by other Authorities.

The incidence of infestation in all premises treated was as follows:

	Bugs	Cockroaches	Other pests	Total
Corporation Houses ..	27	50	8	85
Private Premises	19	63	28	110
	—	—	—	—
	46	113	36	195
	—	—	—	—
Percentage of infestation in all premises	23·6%	57·9%	18·5%	

PHARMACY AND POISONS ACT

102 licences were issued authorising the sale of poisons included in Part 2 of the Poisons List.

RATS AND MICE DESTRUCTION

The following details have been extracted from the annual report required by the Ministry of Agriculture, Fisheries and Food:

	Type of Property				
	Local Authority	Dwelling houses	Agricultural	Business etc.	Total
Complaints received	53	655	2	181	891
Other inspections made	40	93	28	75	236
Properties found to be infested by rats ..	49	307	4	85	445
Properties found to be infested by mice ..	8	71	—	45	124
Notices served for structural work ..	—	1	—	—	1

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Most of the provisions of this Act came into force on the 1st August, 1964, further regulations concerning sanitary accommodation and washing facilities come into force on 1st January, 1966, and those relating to overcrowding on 1st August, 1967. It is estimated that 1,000 premises in Rotherham will be affected by the Act, some of these will be dealt with by the Factory Inspectorate.

It is apparent that, in spite of the publicity already given, many occupiers have still not completed registration forms in respect of their premises. The date for registration was the 31st July, 1964, and it is an offence not to have registered premises for which the Act applies by that date.

MILK

(a) SPECIAL DESIGNATIONS.

All milk sold in Rotherham is now either “Pasteurised,” “Sterilised” or “Untreated.” Processing is done in plants situated in other districts and the bulk of the milk consumed is produced in other areas. Few complaints of lack of cleanliness or keeping quality were received and these were, where possible, with the co-operation of inspectors of other areas, referred directly to the dairies concerned.

The following licences, which are valid until the year ending 1965 were issued in connection with the Milk (Special Designation) Regulations, 1963:

DEALERS' LICENCES.

Tuberculin Tested	13
Pasteurised	20
Sterilised	23

(b) BACTERIOLOGICAL EXAMINATION.

96 samples of milk were taken for examination as to cleanliness and efficacy of heat treatment, with the following results:

					Samples		
					Tested	Passed	Failed
Tuberculin Tested	..	..	..	..	1	1	-
Tuberculin Tested Pasteurised			..	..	35	35	-
Pasteurised	..	..	..	..	30	29	1
Sterilised ..	..	..	..	..	30	30	-

ICE CREAM

62 samples of ice cream were submitted for bacteriological examination with the following results:

Satisfactory		Unsatisfactory	
Grade 1	Grade 2	Grade 3	Grade 4
51	10	-	1

ICED LOLLIES

One sample of iced lollies submitted for bacteriological examination proved to be satisfactory.

SHELLFISH

All consignments of mussels inspected during the year had been submitted to an approved cleansing process.

FOOD PREMISES

The following list of premises and record of visits gives a picture of the types of food trades in the district and the time given to inspection:

UNREGISTERED PREMISES								
Type							Number	Inspections
Bakehouses	..	..	..	..	..	..	30	3
Cafes	..	..	..	..	..	..	27	30
Clubs and licensed premises			..	..	..	..	127	13
Confectioners	..	..	..	..	..	..	62	14
Factory canteens		..	..	..	..	..	39	8
Fish friers	..	..	..	..	..	..	52	8
Fishmongers	..	..	..	..	..	..	28	20
Fruiterers and Greengrocers	..	..	..	..	..	..	121	19
Grocers	..	..	..	..	..	..	294	98
Mineral water factories		..	..	..	..	..	2	-
School kitchens		..	..	..	..	..	20	1
Soft drinks bar		..	..	..	..	..	9	3
Sweet factories		..	..	..	..	..	1	-
Tripe purveyors		..	..	..	..	..	3	-

REGISTERED PREMISES

Type	Number	Inspections
Butchers	97	37
Food preparing premises	71	62
Hawkers	11	3
Ice cream factories	4	10
Ice cream shops or stores	298	376
Pickle factories	1	—
Tripe boilers	1	—
Dairies and milk distributors	292	254

Improvements made in food premises during the year :

Additional wash basins provided	4
Hand washing notices displayed	7
Hot water supplies provided	10
Premises cleansed or repaired	37
Premises improved	5
Accommodation for clothing provided	4
Name and address of food stalls	5
Provision of suitable waste storage	2
First Aid materials provided	3
Pre-packed foods only to be sold	2

FOOD POISONING

No major outbreak of food poisoning arose during the year. 3 single cases of food poisoning were reported.

MEAT

The following details of animals slaughtered at the public abattoir were supplied by the Markets Superintendent:

Cattle	Cows	Calves	Sheep	Pigs	Total
7,486	1,251	85	24,290	11,197	44,309

The estimated weight of fresh killed meat and offals condemned at the public abattoir during the year was:

All causes	20 tons 4 cwt.
Tuberculosis only	16 cwt.

The percentages of animals found to be diseased are given in the following table:

	Cattle excluding cows	Cows	Calves	Sheep	Pigs
Number killed }	7,486	1,251	85	24,290	11,197
Number inspected }					

				Cattle excluding cows	Cows	Calves	Sheep	Pigs
All diseases except tuberculosis and cysticerci :								
Whole carcasses condemned	..	..		2	2	3	61	25
Carcases of which some part or organ was condemned	..	..	..	1,167	489	2	620	422
Percentage affected	..	..	..	15.6	39.2	5.8	2.8	3.9
Tuberculosis only :								
Whole carcasses condemned	..	..		-	-	-	-	-
Carcases of which some part or organ was condemned	..	..	..	-	1	-	-	167
Percentage affected	..	..	..	-	0.07	-	-	1.5
Cysticercosis :								
Carcases of which some part or organ was condemned	..	..	..	38	2	-	-	-
Carcases submitted to treatment by refrigeration	..	..	..	37	2	-	-	-
Generalised and totally condemned	..			-	-	-	-	-
Percentage affected	..	..	..	0.5	0.15	-	-	-

All animals slaughtered at the private slaughterhouse were examined as follows :

Number killed	}	..	..	..	712	-	-	2,243	-
Number inspected									
All diseases except tuberculosis and cysticerci :									
Whole carcasses condemned	..	..			-	-	-	-	-
Carcases of which some part or organ was condemned	..	..	..		72	-	-	18	-
Percentage affected	..	..	..		10.1	-	-	0.8	-
Tuberculosis only :									
Whole carcasses condemned	..	..			-	-	-	-	-
Carcases of which some part or organ was condemned	..	..	..		1	-	-	-	-
Percentage affected	..	..	..		0.1	-	-	-	-
Cysticercosis :									
Carcases of which some part or organ was condemned	..	..	..		1	-	-	-	-
Carcases submitted to treatment by refrigeration	..	..	..		1	-	-	-	-
Percentage effected	..	..	..		0.1	-	-	-	-

The estimated weight of meat condemned was:

All causes	..	..	..	..	..	7 cwts.
Tuberculosis only	..	..	..	..	..	20 lbs.

MERCHANDISE MARKS ACT, 1926

One visit was made in connection with the marking of food. The Marking Orders refer to the correct labelling of such food as apples, tomatoes, currants, ham, meat, dead poultry, margarine, malt products, frozen and chilled salmon and sea trout and honey.

SAMPLING OF FOOD AND DRUGS

270 samples of food and drugs were submitted to the Public Analyst for examination.

Details of all samples taken are given in the following table:

No.	Nature of sample	Genuine		Not reported as genuine	
		Formal	Informal	Formal	Informal
1	Bacon	—	1	—	—
1	Baking powder	—	1	—	—
1	Beef suet	—	1	—	—
1	Black beer	—	1	—	—
1	Blackcurrant health drink ..	—	1	—	—
1	Blackcurrant syrup	—	1	—	—
1	Blanc mange powder	—	1	—	—
2	Butter	—	2	—	—
1	Butterscotch	—	1	—	—
1	Caster sugar	—	1	—	—
1	Cayenne pepper	—	1	—	—
1	Cheese spread	—	1	—	—
1	Chewing gum	—	1	—	—
1	Chicken fillets	—	1	—	—
1	Chicken soup powder	—	1	—	—
1	Christmas pudding	—	1	—	—
1	Cocktail cherries	—	1	—	—
1	Coffee (instant)	—	1	—	—
1	Coffee (pure)	—	1	—	—
1	Coffee and chicory essence ..	—	1	—	—
1	Condensed full cream milk unsweetened	—	1	—	—
1	Cooking oil	—	1	—	—
1	Cooking salt	—	1	—	—
1	Cornflour	—	1	—	—
1	Corn oil	—	1	—	—
1	Cream (pure)	—	1	—	—
1	Cream (fresh)	—	1	—	—
1	Cream (fresh double)	—	1	—	—
1	Creamed macaroni	—	1	—	—
1	Cream of mushroom soup ..	—	1	—	—
1	Creamed rice milk pudding ..	—	1	—	—
1	Currants	—	1	—	—
1	Custard powder	—	1	—	—
1	Cut mixed peel	—	1	—	—
1	Dressed crab with butter ..	—	1	—	—

No.	Nature of sample	Genuine		Not reported as genuine	
		Formal	Informal	Formal	Informal
15	Drugs	-	15	-	-
1	Fish cakes	-	1	-	-
1	Fruit sauce	-	1	-	-
1	Garden mint in vinegar ..	-	1	-	-
1	Gelatine granulated	-	1	-	-
1	Ginger beer	-	1	-	-
1	Glace cherries	-	1	-	-
1	Glucose butterscotch tablets ..	-	1	-	-
1	Golden syrup	-	1	-	-
1	Ground almonds	-	1	-	-
1	Ground ginger	-	1	-	-
1	Ground mixed spice	-	1	-	-
1	Honey	-	1	-	-
57	Ice cream	57	-	-	-
3	Ice cream lollies	3	-	-	-
4	Iced lollies	4	-	-	-
1	Kidney soup	-	1	-	-
1	Lard	-	1	-	-
1	Lemonade powder	-	1	-	-
1	Lemon curd	-	1	-	-
1	Lemon drink	-	1	-	-
1	Lemon flavour	-	1	-	-
1	Lemon juice—pure	-	1	-	-
1	Madras curry powder	-	1	-	-
1	Margarine with 10% butter ..	-	1	-	-
1	Margarine	-	1	-	-
1	Marmalade	-	1	-	-
1	Marzipan	-	1	-	-
83	Milk	83	-	-	-
1	Milk chocolate covered swiss rolls	-	1	-	-
1	Milk chocolate teacakes ..	-	1	-	-
1	Mincemeat	-	1	-	-
1	Mixed chopped candied peel	-	1	-	-
1	Mustard powder	-	1	-	-
1	Non-brewed condiment	-	1	-	-
1	Orange crush	-	1	-	-
1	Orange curd	-	1	-	-
1	Orange squash	-	1	-	-
1	Peanut butter	-	1	-	-
1	Pearl barley	-	1	-	-
1	Pineapple juice	-	1	-	-
1	Plain flour	-	1	-	-
1	Potato crisps	-	1	-	-
1	Potted beef paste	-	1	-	-
1	Potted meat paste	-	1	-	-
1	Powdered cinnamon	-	1	-	-
1	Powdered nutmeg	-	1	-	-
1	Prunes	-	1	-	-
1	Raisins	-	1	-	-

No.	Nature of sample	Genuine		Not reported as genuine	
		Formal	Informal	Formal	Informal
1	Raspberry jam	—	1	—	—
2	Red cabbage	—	2	—	—
1	Rice	—	1	—	—
1	Rose hip syrup	—	1	—	—
1	Saccharine tablets	—	1	—	—
1	Sage and onion stuffing	—	1	—	—
1	Salad cream	—	1	—	—
1	Scone mix	—	1	—	—
1	Seed tapioca	—	1	—	—
1	Self raising flour	—	1	—	—
1	Spanish juice	—	1	—	—
1	Special full cream condensed milk	—	1	—	—
1	Sponge mix	—	1	—	—
1	Stewed steak	—	1	—	—
1	Stoned dates	—	1	—	—
1	Syrup sponge pudding	—	1	—	—
1	Table jelly	—	1	—	—
1	Tea	—	1	—	—
1	Tinned pineapple slices	—	1	—	—
1	Tomato juice	—	1	—	—
1	Tomato ketchup	—	1	—	—
1	Tomato soup powder	—	1	—	—
2	Vinegar	—	2	—	—
1	White pepper	—	1	—	—
1	Yeast	—	1	—	—
1	Ground nut oil	—	1	—	—
270		147	123	—	—

FERTILISERS AND FEEDING STUFFS ACT, 1926

6 samples of fertilisers and 6 of feeding stuffs were taken for analysis. All were satisfactory, with the exception of one sample of feeding stuffs which varied from the statutory statement.

OTHER FOOD

In the following table details are given of food surrendered.

Number				Lb.	Number				Lb.
Bacon .. ..	..	..	—	892	Fruit pies .. ..	..	3	—	
Bacon joints .. ..	..	..	6	—	Jars .. ..	..	74	—	
Baking powder .. ..	..	..	—	7	Meat pies .. ..	..	48½	—	
Bottles .. ..	..	..	5	—	Packets .. ..	..	105	—	
Butter .. ..	..	..	—	3	Pork pies .. ..	..	39	—	
Cakes .. ..	..	..	2	—	Sausages .. ..	..	—	161	
Cheese .. ..	..	..	—	60	Sausage rolls .. ..	..	11	—	
Chickens .. ..	..	..	—	97	Tins .. ..	..	2,976	—	
Cooked meat .. ..	..	..	—	218	Turkeys (dressed) .. ..	..	—	36	
Fresh herrings .. ..	..	..	—	28					

Condemned or surrendered food other than meat is buried by the Cleansing Department in the controlled tip.

CLEAN AIR

Visits were made in connection with atmospheric pollution including smoke observations at factories and inspections relating to smoke control areas.

No further smoke control orders were made during the year but a programme of new areas was prepared and approved now that the picture in relation to smokeless fuels, and the type of appliances to be installed, has been clarified.

The appointment of a technical assistant will enable us to speed up progress in this work in spite of the shortage of public health inspectors.

News of two new fuels to be produced by the National Coal Board is very welcome. One of these, "Homefire," which is to be produced locally is suitable for the open fire. Production of 120,000 tons a year is expected to be reached in the near future. As a manufactured fuel it is to be anticipated that this will be dearer than coal, and, although it can be used in a simple open appliance, it is all the more important that efficient appliances be installed which will make the maximum use of the heat available if the cost of heating by this fuel is to be reasonably comparable with other means of heating.

One of the most encouraging signs in the movement for clean air is the popularity of central heating. The primary motive for installing central heating is the desire for added comfort but, as smokeless fuels are used for domestic central heating plants it has the added advantage of reducing smoke emission at the same time. When it is considered that this method of heating due to the high efficiencies obtained, costs little more to operate than two open fires, it is hardly surprising that its popularity grows by leaps and bounds. All new houses should have some form of central heating and be smokeless.

This step forward in efficiency may, perhaps, one day be matched by a better use of the hot water produced by our power stations. The clouds of water vapour issuing from the tops of cooling towers, which themselves are eyesores in the centre of industrial towns, will surely be used to better advantage in years to come. Apart from the substantial heat value of the hot water available, the elimination of these vast masses of vapour in times of fog must be beneficial.

The installation of modern dust arrestment plant at our local power station is now complete, the plant is working satisfactorily and there is a marked difference in the colour of the chimney plumes. Many tons of fine dust previously deposited daily on Rotherham and surrounding areas are now being collected. It is particularly fortunate that this work has been carried out as the works are engaged on full load for much longer periods than for many years.

The difficulties experienced in operating the dust arrestment plant at one of our local steel works are gradually being overcome. The problems which have to be faced in designing and working equipment of this type are immense, including the danger of

explosion in the plant. In these circumstances it is reasonable that every consideration should be given to those responsible in their efforts to bring the plant to maximum efficiency as soon as possible.

The bag filter plant mentioned in the 1963 report has solved the problem of fume emission from the exothermic process at one of our metallurgical works. The bags have had to be replaced more quickly than was anticipated, but the cleaning process is quite satisfactory.

The two serious nuisances which existed at Blackburn and Canklow, both arising from complex manufacturing processes connected with the metallurgical industries, have now been abated.

In 1960, knowing that two new steel plants were to be commissioned both using tonnage oxygen with the resultant production of fine ferrous fume, we began a check on the iron oxide content of our deposit gauges. It is pleasing to be able to report that no increase has been found since the new processes began operation.

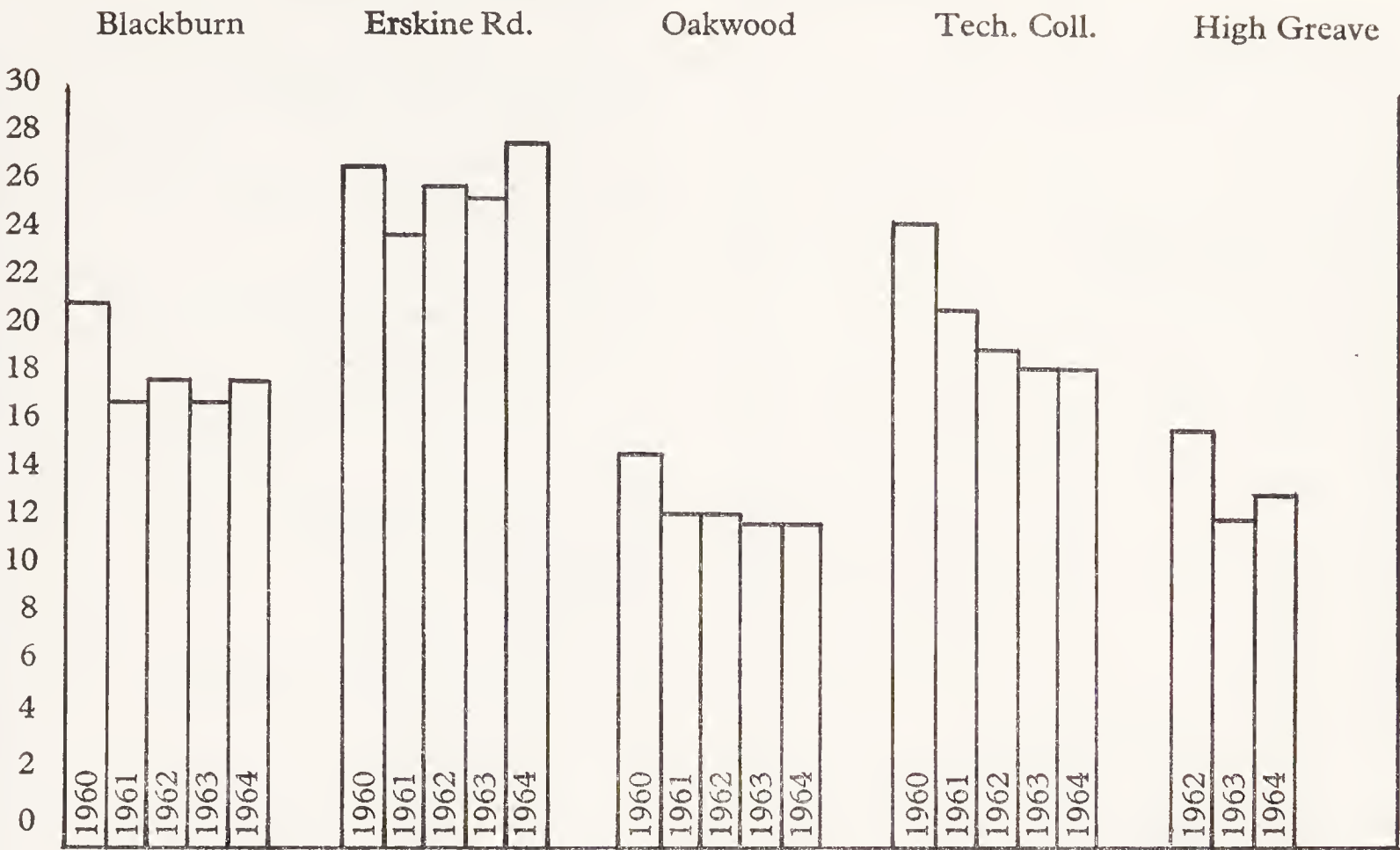
Details of the yearly result for deposit and sulphur gauges are given on page 35.

CLERICAL WORK

To complete the picture of work done by the section during the year details of office interviews and outgoing correspondence are of interest, 928 complaints from residents were dealt with. 873 informal notices and 150 statutory notices were served, and 185 licences were issued. Including reminder notices and other letters, 5,654 postal packages were sent out during the year.

1. STANDARD DEPOSIT GAUGES.

(a) Average monthly deposit for years 1960-1964.



(b) Iron oxide content of average monthly deposit in tons/sq. mile for years 1960-1964



(c) Average yearly sulphur deposit.



SUMMARY OF PUBLIC HEALTH INSPECTORS' VISITS AND NOTICES
SERVED DURING THE YEAR ENDING 1964.

Disease of Animals	6	Clubs	1
Merchandise Marks Act	1	Licensed premises (hygiene) ..	12
Water supply	16	Atmospheric pollution	612
Drainage	2,030	Shops, Offices and Railway premises	325
Fried fish shops	8	Miscellaneous sanitary visits ..	2,591
Houses-let-in-lodgings	24	Hairdressers	18
Tents, vans and sheds	55	Matters to other departments ..	165
Canal boats	3	Number of houses inspected under	
Factories	53	Public Health Acts	499
Workplaces	1	Re-visits to above houses	1,659
Drain tests	293	Number of houses inspected under	
Bakehouses	16	Housing Acts	35
Poisons	62	Re-visits to above houses	1
Licensed premises	27	Overcrowding visits	2
Interviews	1,144	Overcrowding re-visits	3
Pet animals	13	Verminous premises	183
Rats and mice	128	Re-visits to verminous premises ..	1
Miscellaneous housing visits ..	444	Bakeries (hygiene)	3
Infectious disease enquiries ..	23	Milk—bacteriological	96
Miscellaneous infectious disease visits	52	Ice cream (sampling)	63
Visits to slaughterhouses	304	Food and drug samples	270
Visits to other premises	9	Fertilisers and feeding stuffs ..	12
Butchers	37	Miscellaneous food visits	167
Canteens	8	Water samples	84
Dairies and milk distributors ..	254	Notices served:	
Fishmongers and poulterers	20	Number of nuisances found	1,267
Food preparing premises	62	Number of nuisances abated	1,040
Grocers	98	Number of verbal notices served ..	356
Greengrocers and fruiterers	19	Number of informal notices served ..	973
Ice cream premises	386	Number of informal notices complied	
Market stalls	18	with	807
Restaurants	30	Number of statutory notices served	150
Street vendors and hawkers carts ..	3	Number of statutory notices complied	
Schools	1	with	155
Sweetshops	14	Number of Offices, Shops and Rail-	
Fairground	36	way premises notices served ..	64

ATMOSPHERIC POLLUTION RECORDS

1. STANDARD DEPOSIT GAUGES

(a) Water—insoluble deposit in tons per square mile per month.

Month	Blackburn		Erskine Road		Oakwood		Technical College		Ferham Clinic		High Greave	
	1963	1964	1963	1964	1963	1964	1963	1964	1963	1964	1963	1964
Jan.	5.57	9.82	8.81	15.78	3.02	6.30	8.66	9.19	6.52	11.35	2.21	6.98
Feb.	1.26	—	10.02	12.55	3.02	4.73	7.84	8.20	4.86	9.35	4.02	7.51
March	29.15	11.94	17.27	16.96	8.35	7.48	13.91	12.56	16.93	14.41	7.21	6.25
April	9.27	8.86	20.22	21.33	7.61	6.20	15.40	8.55	12.98	—	7.87	7.08
May	9.10	9.17	22.02	15.29	7.18	6.43	15.47	12.21	12.07	—	9.12	11.46
June	8.38	8.11	18.10	28.24	7.14	8.55	12.21	17.32	10.40	—	7.90	6.91
July	8.66	6.77	16.02	18.48	5.40	6.91	10.75	11.00	8.43	—	6.09	7.31
August	—	8.93	26.08	14.36	7.85	6.57	12.71	10.57	7.95	—	5.76	6.06
Sept.	7.11	14.13	19.94	23.47	6.20	7.04	10.90	10.86	7.85	—	6.06	5.50
Oct.	7.80	11.53	19.97	23.72	6.03	5.26	8.77	9.19	7.65	—	5.76	8.30
Nov.	13.65	9.38	15.85	25.56	3.76	4.86	10.79	12.42	10.20	—	4.58	6.52
Dec.	8.11	10.44	13.80	21.99	4.89	6.57	9.58	13.24	9.65	—	5.30	5.60
Mthly. Avge.	9.82	9.91	17.34	19.81	5.87	6.40	11.41	11.27	9.62	11.70	5.99	7.12

(b) Water—soluble deposit in tons per square mile per month.

Month	Blackburn		Erskine Road		Oakwood		Technical College		Ferham Clinic		High Greave	
	1963	1964	1963	1964	1963	1964	1963	1964	1963	1964	1963	1964
Jan.	5.41	5.61	11.65	8.08	10.26	4.09	9.58	5.57	12.44	8.70	7.74	4.74
Feb.	3.80	—	6.10	7.32	2.98	5.57	4.79	5.71	5.00	6.59	4.51	5.33
March	14.17	16.73	9.26	11.10	5.20	7.71	7.70	10.40	10.88	11.93	5.60	9.38
April	7.22	5.85	9.50	7.84	6.07	4.53	8.34	5.47	9.45	—	7.14	4.84
May	5.03	3.56	6.59	5.58	5.90	2.15	6.25	2.91	7.00	—	5.60	3.56
June	4.79	10.88	6.24	9.16	5.33	6.27	5.78	9.83	6.25	—	6.45	6.81
July	7.25	5.10	8.29	7.77	4.49	6.07	4.76	6.57	3.50	—	5.10	4.12
August	—	6.06	9.68	6.31	5.30	4.46	6.25	3.73	6.87	—	5.30	4.74
Sept.	4.52	4.93	7.39	7.28	4.19	4.46	4.93	5.71	7.27	—	3.79	5.07
Oct.	5.82	8.49	6.80	8.32	4.66	4.69	6.07	7.03	7.31	—	3.95	6.02
Nov.	8.14	8.62	10.99	10.27	8.45	3.69	12.53	6.99	13.02	—	6.42	8.46
Dec.	5.00	14.58	6.52	9.85	6.20	8.93	6.25	10.40	7.99	—	3.88	7.14
Mthly. Avge.	6.46	8.21	8.25	8.24	5.75	7.07	6.93	6.69	8.08	9.07	5.45	5.83

(c) Total deposit in tons per square mile per month.

	Blackburn		Erskine Road		Oakwood		Technical College		Ferham Clinic		High Greave	
Month	1963	1964	1963	1964	1963	1964	1963	1964	1963	1964	1963	1964
Jan.	10.98	15.43	20.46	23.86	13.28	10.39	18.24	14.76	18.97	20.05	9.94	11.72
Feb.	5.06	—	16.13	19.87	6.00	10.29	12.63	13.91	9.86	15.95	8.53	12.84
March	43.32	26.76	26.53	28.06	13.55	15.19	21.61	22.96	27.80	26.34	12.81	15.64
April	16.49	14.71	29.72	29.17	13.68	10.73	23.74	14.02	22.43	—	15.01	11.92
May	14.13	12.73	28.61	20.88	13.01	8.58	21.72	15.12	19.07	—	14.72	15.01
June	13.17	18.99	24.35	37.40	12.47	14.82	17.99	27.15	16.66	—	14.35	13.73
July	15.91	6.77	24.31	26.25	9.89	12.98	15.51	17.57	11.93	—	11.19	11.42
August	—	14.99	35.76	20.66	13.14	11.03	18.95	14.30	14.82	—	11.06	10.80
Sept.	11.63	19.06	27.33	30.76	10.39	11.50	15.83	16.57	15.13	—	9.84	10.57
Oct.	13.62	20.02	26.77	32.04	10.70	9.96	14.83	16.22	14.96	—	9.71	14.32
Nov.	21.80	18.00	26.84	35.82	12.20	8.55	23.32	19.41	23.22	—	11.00	14.98
Dec.	13.11	25.01	20.32	31.84	11.10	15.49	15.83	23.64	17.64	—	9.18	12.74
Mthly. Avge.	16.29	17.49	25.59	28.05	11.61	11.62	18.35	17.96	17.70	20.78	11.44	12.97

2. SULPHUR DETERMINATION (LEAD PEROXIDE CANDLE)

	Blackburn		Erskine Road		Oakwood		Technical College		Ferham Clinic		High Greave	
Month	1963	1964	1963	1964	1963	1964	1963	1964	1963	1964	1963	1964
Jan.	3.48	3.41	3.14	3.61	3.39	2.75	4.29	4.48	5.63	5.40	2.93	3.33
Feb.	4.18	3.23	2.81	2.82	2.89	2.44	3.93	3.31	4.76	4.10	2.86	2.85
March	3.54	2.23	2.86	1.70	2.05	1.77	2.65	2.91	4.77	2.85	2.42	1.90
April	2.56	2.65	2.12	2.75	1.73	1.85	2.77	3.24	3.69	—	1.99	2.74
May	2.01	2.15	2.07	3.40	1.38	1.46	2.39	3.08	3.19	—	2.08	2.10
June	1.92	1.97	1.69	2.40	1.18	1.25	2.00	2.22	2.30	—	1.55	1.78
July	1.62	1.79	1.44	2.07	1.06	1.13	1.68	1.88	2.17	—	1.34	1.81
August	1.86	1.50	1.82	2.08	1.21	1.22	2.10	1.95	2.36	—	1.64	1.52
Sept.	2.24	2.19	2.36	2.88	1.32	1.59	2.25	2.72	2.65	—	2.16	1.75
Oct.	2.73	2.30	2.67	1.89	1.62	1.93	2.64	3.69	3.60	—	2.34	2.06
Nov.	3.29	2.78	3.90	4.02	2.08	1.92	4.09	4.16	4.82	—	2.96	5.10
Dec.	3.27	3.08	2.61	—	2.61	2.16	3.97	4.50	4.47	—	2.56	3.62
Mthly. Avge.	2.72	2.44	2.45	2.46	1.87	1.78	2.89	3.17	3.70	4.11	2.23	2.54

Milligrammes of SO₃/day collected by 100 square centimetres.

AGED AND INFIRM PERSONS

No application was made under Section 1 (3) of the National Assistance (Amendment) Act, 1951, for a removal order during the year.

PUBLIC MORTUARY

	1963	1964
Bodies received (including 114 from outside the County Borough)	284	286
Post-mortems	257	279
Total number of days bodies held in mortuary ..	1,159	1,186

SUMMARY OF ADMISSIONS—1964

Brought in by :

Borough Ambulance	—from home	..	..	..	..	40
	„ street	..	..	..	..	16
	„ works	..	..	..	..	7
West Riding Ambulance	— „ home	..	..	..	..	8
	— „ street	..	..	..	..	3
Private Ambulance	—	..	..	..	..	5
Mortuary vehicle	— „ home	..	..	..	..	59
	„ hospital	..	..	..	..	147
	„ river	..	..	..	..	1
						286

MONTHLY ADMISSIONS

January	..	..	..	..	..	27
February	..	..	..	..	..	30
March	..	..	..	..	..	30
April ..	..	..	..	..	..	23
May ..	..	..	..	..	..	18
June ..	..	..	..	..	..	24
July ..	..	..	..	..	..	17
August	..	..	..	..	..	14
September	..	..	..	..	..	30
October	..	..	..	..	..	25
November	..	..	..	..	..	19
December	..	..	..	..	..	29
						286

CAUSES OF DEATH.

					County Borough	Outside County Borough	Total
Medical and surgical conditions	..				128	83	211
Suicide	..	..	..	..	9	4	13
Works accidents	..	..	..		2	6	8
Road accidents	..	..	..		10	16	26
Home accidents	..	..	..		12	7	19
Other accidents	..	..	..		4	5	9
					165	121	286

Details of suicides in the County Borough.

Cause of Death						Sex	Age
Coal gas poisoning	..	..	..	..	..	F	78
„	..	..	..	..	..	M	52
„	..	..	..	..	..	M	57
„	..	..	..	..	..	M	59
„	..	..	..	..	..	M	67
„	..	..	..	..	..	M	82
Barbiturates	..	..	..	..	..	F	60
„	..	..	..	..	..	F	66
Hanging	..	..	..	..	..	M	49

INFECTIOUS DISEASES AND TUBERCULOSIS

The prevalence of the infectious diseases notifiable in the county borough is shown in the following table: —

Disease	1960	1961	1962	1963	1964
Acute encephalitis—Infective	—	—	—	—	—
Post-infectious	—	—	—	—	—
Acute poliomyelitis—Paralytic	1	1	—	—	—
Non-paralytic	—	—	—	—	—
Diphtheria	—	—	—	—	—
Dysentery	62	64	60	37	43
Encephalitis lethargica	—	—	—	—	—
Erysipelas	6	5	6	2	2
Malaria	—	—	—	—	—
Measles	638	1019	27	2112	720
Meningococcal infection	3	—	2	1	1
Ophthalmia neonatorum	—	—	—	—	—
Pemphigus neonatorum	—	—	—	—	—
Pneumonia	20	26	25	18	27
Puerperal pyrexia	62	57	27	40	33
Relapsing fever	—	—	—	—	—
Scarlet fever	105	72	69	124	95
Smallpox	—	—	—	—	—
Typhoid and paratyphoid fevers	1	—	—	—	—
Typhus fever	—	—	—	—	—
Whooping cough	145	13	2	191	47
Tuberculosis—respiratory	21	22	27	27	23
other forms	7	6	7	5	5
Food poisoning	23	4	1	14	3
Totals	1094	1289	253	2571	999

In the following table details are given of the age and ward distribution of the notifications received, together with the numbers of cases removed to hospital and the deaths occurring :

Notifiable disease	No. of cases notified														Total cases notified in each ward of the borough										Total cases removed to hospital	Total deaths	
	At ages—years														Total cases notified in each ward of the borough												
	At all ages	Under 1 year	1 to 2 years	2 to 3 years	3 to 4 years	4 to 5 years	5 to 10 years	10 to 15 years	15 to 20 years	20 to 35 years	35 to 45 years	45 to 65 years	65 years and over	Age Unknown	Clifton	East	Greasbrough	Herringthorpe	Kimberworth	Masbro'	St. Ann's	South	Thornhill	Thorpe Hesley			West
Acute encephalitis—infective ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Post infectious	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Acute poliomyelitis—paralytic ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Non-paralytic	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Dysentery ..	43	3	9	6	9	6	3	1	3	3	..	..	..	..	2	2	..	..	4	6	2	..	..	..	..	..
Encephalitis lethargica ..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..
Erysipelas ..	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..
Food poisoning ..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..
Malaria ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..
Measles ..	720	36	112	104	101	103	262	..	..	1	..	..	..	1	89	85	54	74	89	44	87	57	45	44	52	27
Meningococcal infection	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..
Ophthalmia neonatorum	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pemphigus neonatorum	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia ..	27	..	..	..	..	1	1	..	..	2	8	..	13	..	2	3	2	3	4	3	3	3	2	2	4	..
Puerperal pyrexia	33	..	..	..	..	..	..	..	4	24	..	..	..	..	1	3	1	..	..	1	2	..	..	..	21	..
Relapsing fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Scarlet fever ..	95	..	..	9	12	20	46	7	1	..	..	..	..	..	11	7	4	11	10	9	5	16	9	11	2	..
Smallpox ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Typhoid and paratyphoid fevers	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Typhus fever ..	47	7	..	7	11	5	9	..	..	1	..	..	..	..	2	3	1	3	4	7	8	..	..	8	2	..
Whooping cough	19	..	..	..	..	..	1	..	1	3	5	..	1	..	1	3	1	1	1	2	3	..	2	3	2	..
Tuberculosis : respiratory, males	4	..	..	..	..	..	..	..	..	3	1	..	..	..	1	3	1	1	1	1	1	..	..	1	2	..
females	3	..	..	..	..	..	..	..	..	1	2	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..
other forms, males	2	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
females	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	999	48	128	126	133	135	323	8	9	39	17	17	15	1	109	107	63	96	112	73	113	77	67	69	113	91	45

The following table gives details of the notifications received monthly throughout the year : —

Notifiable disease	January	February	March	April	May	June	July	August	September	October	November	December	Total
Acute encephalitis—infective ...	-	-	-	-	-	-	-	-	-	-	-	-	-
Post infectious	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute poliomyelitis—paralytic ...	-	-	-	-	-	-	-	-	-	-	-	-	-
Non-paralytic	-	-	-	-	-	-	-	-	-	-	-	-	-
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	-	-	-	-	-	-	-	1	29	2	7	4	43
Encephalitis lethargica ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Erysipelas	-	-	-	-	-	1	-	-	1	-	-	-	2
Food poisoning	-	-	-	-	-	-	1	-	1	-	1	-	3
Malaria	-	-	-	-	-	-	-	-	-	-	-	-	-
Measles	4	1	4	9	4	12	63	45	27	170	219	162	720
Meningococcal infection ..	1	-	-	-	-	-	-	-	-	-	-	-	1
Ophthalmia neonatorum ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Pemphigus neonatorum ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Pneumonia	7	5	2	-	1	-	-	-	1	4	2	5	27
Puerperal pyrexia	-	2	3	1	1	2	4	5	3	6	2	4	33
Relapsing fever	-	-	-	-	-	-	-	-	-	-	-	-	-
Scarlet fever	10	3	8	7	2	7	8	4	1	6	11	28	95
Smallpox	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhoid and paratyphoid fevers	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhus fever	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping cough	2	1	2	4	2	2	1	4	8	9	7	5	47
Tuberculosis: respiratory, males	7	-	-	-	4	4	-	1	3	-	-	-	19
females ..	1	-	-	-	-	-	1	-	-	2	-	-	4
other forms, males	3	-	-	-	-	-	-	-	-	-	-	-	3
females ..	1	-	-	-	-	-	1	-	-	-	-	-	2
Totals	36	12	19	21	14	28	79	60	74	199	249	208	999

During the year 91 cases of notifiable disease were notified from or removed to hospitals in the district, and the following table gives the distribution:

Disease	Infectious Diseases Hospitals			Other Hospitals			Total
	Lodge Moor Sheffield	Doncaster Isolation Hospital	Kendray Hospital, Barnsley	Moorgate General Hospital	Rotherham Hospital	Other Hospitals	
Dysentery	29	—	—	—	—	—	29
Food Poisoning	2	—	—	—	—	—	2
Measles	7	—	—	—	—	—	7
Meningococcal Infection	—	—	—	1	—	—	1
Pneumonia	—	—	—	—	—	1	1
Puerperal Pyrexia	—	—	—	31	—	—	31
Scarlet Fever	—	—	—	—	—	—	—
Tuberculosis	—	—	—	—	1	15	16
Whooping Cough	4	—	—	—	—	—	4
Total ..	42	—	—	32	1	16	91

In addition to these cases, 76 patients were admitted to Lodge Moor Hospital, Sheffield, for observation and were ultimately diagnosed as follows:

Admitted for observation for	Final Diagnosis																													
	Allergy	Bronchitis and Respiration Pneumonia	Broncho-pneumonia	Cerebral Disease	Cerebral Haemorrhage	Chicken Pox	Chronic Bronchitis and Emphysema	Chronic Bronchitis	Chronic Poliomyelitis	Coxsackie Infection	Diarrhoea	Enteritis	Erythema Multiform	Feeding Problem	Gastritis and Diabetes	Gastro Enteritis	Glandular Fever	Lobar Pneumonia	Mumps and Meningitis	Non-specific Diarrhoea	Papula Urticaria	Pneumonia	Stomatitis	Tonsillitis	Umbilical Sepsis	Upper Respiratory Infection	Virus Enteritis	Virus Meningitis	N.A.D.	TOTAL
Bronchitis ..			1																											1
Broncho-pneumonia ..							1																							1
Chicken Pox ..						2															1									3
Diarrhoea ..																									1					1
Diarrhoea and Diabetes ..																				1										1
Diarrhoea and Vomiting ..																2														1
Dysentery ..										3				1																3
Enteritis ..		1									1	13			1	3					1		1						2	7
Gastro Enteritis ..					1							3				10										1			1	22
Glandular Fever ..																	3									1			3	18
Meningitis ..					1													2						1						4
Mumps and Meningitis ..																			1			1								6
Old Poliomyelitis ..									1																					1
Pneumonia ..								1																						1
Scarlet Fever ..	1																													1
Steven Johnson's Syndrome ..													1																	1
Throat Infection ..																	1													1
Tonsillitis and Enteritis ..																								1						1
Virus Meningitis ..																												1		1
Vomiting ..																													1	1
Total ..	1	1	1	1	1	2	1	1	1	3	1	16	1	1	1	15	4	2	1	2	1	1	1	2	1	1	1	2	9	76

In amplification of the foregoing tables the following observations are made on the number of notifiable diseases.

There were no cases of diphtheria or acute poliomyelitis notified during the year by general medical practitioners.

Of the 43 cases of dysentery notified, 29 were treated in hospital.

2 cases of erysipelas were reported, both of whom remained at home.

720 cases of measles were reported during the year and 7 cases were treated in hospital. No deaths occurred from this disease.

47 cases of whooping cough were notified, and 4 were treated in hospital.

33 notifications of puerperal pyrexia were received, 31 of which were reported from hospital.

95 notifications of scarlet fever were received. No deaths occurred.

3 notifications of food poisoning were received during the year, and 2 were treated in hospital.

There were 27 cases of pneumonia, 1 of which was admitted to hospital.

28 cases of tuberculosis were notified and 16 cases were admitted to hospital.

TUBERCULOSIS

NEW CASES AND MORTALITY DURING 1964

NOTIFICATION AND DEATHS.—The following table gives details of the number of primary notifications received during the year :

Pulmonary		Non-pulmonary		Total
Males	Females	Males	Females	
19	4	3	2	28

In addition, the following cases were brought to notice other than by formal notification :

	Pulmonary	Non-pulmonary
Death returns from local registrars ..	—	—
Transferable deaths from Registrar General ..	—	—
Posthumous notifications	—	—

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table :

Age period Years		New cases*				Deaths			
		Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
		M.	F.	M.	F.	M.	F.	M.	F.
Under 1 ..	..	—	—	—	—	—	—	—	—
1-2 ..	..	—	—	—	—	—	—	—	—
2-5 ..	..	—	—	—	—	—	—	—	—
5-10 ..	..	1	—	—	—	—	—	—	—
10-15 ..	..	—	—	—	—	—	—	—	—
15-20 ..	..	1	—	—	—	—	—	—	—
20-25 ..	..	1	1	1	—	—	—	—	—
25-35 ..	..	2	2	—	1	—	—	—	—
35-45 ..	..	5	1	2	—	—	—	—	—
45-55 ..	..	2	—	—	1	—	—	—	—
55-65 ..	..	6	—	—	—	—	—	—	—
65-75 ..	..	—	—	—	—	—	—	—	—
75 and upwards ..	..	1	—	—	—	1	—	—	—
Totals ..	..	19	4	3	2	1	—	—	—

* Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year.

A review of the deaths which occurred during 1964 amongst notified cases of tuberculosis shows the following periods elapsed between notification and death:

Notification	Pulmonary	Non-pulmonary
After death	—	—
Within one month	—	—
1—3 months	—	—
4—6 months	1	—
7—12 months	—	—
1—2 years	—	—
2—3 years	—	—
3—4 years	—	—
4—5 years	—	—
Over 5 years	—	—
From death returns	—	—
Total number of deaths from tuberculosis	1	—
Causes other than tuberculosis	8	—

No action was required for cases of wilful neglect or refusal to notify.

MASS RADIOGRAPHY SURVEY

The Sheffield Mass Radiography Unit visited Rotherham 3rd to 29th July, 1964. The total attendance of 4,988 was a decrease on the previous year, (5,405). The number of patients referred to their own doctor was 132 and 29 were referred to the Chest Clinic; of this latter total 6 were found to be suffering from active tuberculosis.

The following table summarises the attendances when the unit visited the town: —

Year	Attendances for miniature films									Grand Totals
	Public sessions			School children			Organised groups			
	Males	Females	Total	Males	Females	Total	Males	Females	Total	
1958	2,160	2,646	4,806	103	72	175	829	1,432	2,261	7,242
1959	2,058	3,031	5,689	211	271	482	876	1,132	2,008	8,179
1960	1,978	2,503	4,481	96	80	176	322	382	893	5,550
1961	2,068	2,690	4,758	193	157	350	483	655	1,138	6,246
1962	2,678	3,290	5,968	64	73	137	337	478	815	6,920
1963	1,972	2,146	4,118	6	18	24	401	862	1,263	5,405
1964	1,657	2,158	3,815	—	—	—	459	714	1,173	4,988

Of the 4,988 persons attending, 84 were recalled for re-examination by large film. Of these, 50 were males and 34 females.

The following table gives details of the persons who were referred to their own doctor, the Chest Clinic, or to hospital, etc :

	Males	Females	Total
Chest Clinic	15	14	29
Patient's own doctor	85	47	132
Recheck in 1-12 months time	3	4	7
	<hr/> 103	<hr/> 65	<hr/> 168

The provisional diagnoses of the persons referred to the Chest Clinic were as follows: —

Provisional diagnosis	Males	Females	Total
Active tuberculosis	4	2	6
Inactive tuberculosis	3	2	5
Neoplasm	—	1	1
Sarcoidosis	—	1	1
Pneumoconiosis	1	—	1
Pneumoconiosis with P.M.F.	1	—	1

Provisional diagnosis				Males	Females	Total
Acute inflammatory lesions	..	..	..	1	6	7
Post inflammatory fibrosis	..	..	..	3	—	3
Bronchitis and emphysema	..	..	..	1	—	1
Heart disease .. ..	..	..	..	—	1	1
Pericardial cyst .. ..	..	..	..	—	1	1
Nil abnormal detected	..	..	..	1	—	1
				—	—	—
			Total ..	15	14	29
				—	—	—

The following table shows some other abnormalities found during the survey:—

Abnormality				Males	Females	Total
Old healed tuberculosis ..	..	..	..	—	3	3
Inactive tuberculosis ..	..	..	..	3	—	3
Bronchitis and emphysema	..	..	..	16	2	18
Pneumoconiosis .. ..	..	..	..	19	—	19
Sarcoidosis .. ..	..	..	..	—	1	1
Acute inflammatory lesions	..	..	..	5	—	5
Post inflammatory fibrosis	..	..	..	2	1	3
Heart disease .. ..	..	..	..	10	19	29
Emphysematous bulla ..	..	..	..	1	—	1
Hiatus hernia .. ..	..	..	..	—	2	2
Substernal thyroid ..	..	..	..	—	1	1
			Total ..	56	29	85

VENEREAL DISEASE

The following table gives the number of new cases of gonococcal infection occurring in the County Borough :

Year	15-19 years		20 years and over		Total
	Male	Female	Male	Female	
1959	1	1	23	3	28
1960	—	1	35	3	39
1961	2	5	63	9	79
1962	1	2	32	3	38
1963	—	1	23	13	37
1964	1	1	21	5	28

CARE OF MOTHERS AND YOUNG CHILDREN

CHILD WELFARE CENTRES

The following table shows the usage of the clinics :

Centre	Sessions held		New registrations			Total children attending			Total attendances			Medical consultations		
	Dr.	H.V.	Un.	1-2	2-5	Un.	1-2	2-5	Un.	1-2	2-5	Un.	1-2	2-5
			1 yr.	yrs.	yrs.	1 yr.	yrs.	yrs.	1 yr.	yrs.	yrs.	1 yr.	yrs.	yrs.
Ferham House ...	99	—	303	18	14	485	170	214	3070	742	510	1869	458	201
Cranworth Road ...	99	—	282	16	14	427	147	209	2525	533	617	1516	345	191
Thorpe Hesley ...	25	24	39	1	—	58	32	46	513	192	153	117	39	18
Greasbrough ...	22	30	90	5	5	137	52	63	1032	324	195	329	88	40
Canklow ...	49	—	77	14	6	113	62	74	618	265	192	370	171	95
Blackburn ...	24	28	70	5	9	121	37	92	844	227	323	301	67	76
Highgreave ...	23	29	70	3	5	122	42	49	830	236	121	377	87	41
Broom Valley ...	24	24	78	4	7	122	48	58	819	215	151	291	81	50
Wheatley Road ...	52	95	200	5	4	328	153	247	2585	768	758	714	216	133
Broom Lane ...	52	48	244	21	9	417	181	160	2502	878	408	900	457	124
Total 1964 ...	469	278	1453	92	73	2330	924	1212	15338	4380	3428	6784	2009	969
Total for 1963	466	282	1492	89	96	2265	1035	1505	13629	4149	3798	5414	1908	1455

In all, 4,466 children made 23,146 attendances during 1964 as compared with 4,805 children making 21,576 attendances during 1963.

Kimberworth Park Clinic was transferred to new premises at Wheatley Road on 23rd November, 1964. The new premises are delightful and are appreciated by both staff and the patients using the clinic.

In addition to the child welfare clinics the following pre-school children were referred during 1964 to the specialist and other treatment clinics held on centre premises.

	Cases	Total Inspections
Orthopaedic	27	51
Orthopaedic treatment	10	483
Aural treatment	143	349
Ophthalmic	77	142
Chiropody	4	4
Dental	343	484
Minor ailment treatment	27	79

At the Ophthalmic clinic 58 children under 5 years of age were submitted for refraction. In 32 cases glasses were prescribed. 8 re-inspections of children in this age group were also made during the year.

HEALTH EDUCATION.

During the year health visitors continued their contribution to health education by arranging displays in clinics on various health topics.

Films were shown at mothercraft classes held at Broom Lane and Ferham House clinics. Three evening sessions held for expectant mothers and their husbands were well attended. Talks were given to 10 outside organisations. A health visitor attended one secondary school and gave talks and a mothercraft demonstration to senior pupils.

CONGENITAL DEFECTS

The following analysis shows the number of children notified to have been live or still-born during the year 1964 with the listed congenital defects:

Congenital defect							Number of births
Congenital heart disease	..	..	..	..	..	..	6
Talipes	..	..	..	..	..	..	4
Hydrocephalus	..	..	..	..	..	..	3
Limb reduction deformities	..	..	..	..	..	..	2
Spina bifida	..	..	..	..	..	..	2
Spina bifida, meningocele and hydrocephalus						..	1
Spina bifida and meningocele	..	..	..	..	..	..	1
Congenital dislocation of hip	..	..	..	..	..	..	1
Harelip	..	..	..	..	..	..	1
Polycystic kidneys	..	..	..	..	..	..	1
Mongol	..	..	..	..	..	..	1
Imperforate anus	..	..	..	..	..	..	1
Hiatus hernia	..	..	..	..	..	..	1
Adreno-genital syndrome	..	..	..	..	..	..	1
Osteogenesis imperfecta	..	..	..	..	..	..	1
							—
Total							27
							—

REGISTER OF POTENTIALLY HANDICAPPED CHILDREN UNDER FIVE

1964 was the second year in which a register was maintained of those children who are potentially handicapped as a result of various conditions. It has proved of immense value in ensuring that treatment is obtained, facilitating the ascertainment of educationally handicapped children, and in planning future special educational requirements. Children on the register can be reviewed periodically and their parents advised about particular problems by the medical officers and health visitors. The work involved is considerable but very worthwhile. At the end of the year 110 children were on the register and an analysis of the main reasons for inclusion is shown on next page.

Retardation	..	..	..	..	..	..	24
Spina bifida, meningocoele, hydrocephalus	..	..					12
Congenital heart disease	..	..	..	..	..	..	10
Cleft palate, hare lip	..	..	..	..	..	..	9
Epilepsy	..	..	..	..	..	..	8
Cerebral palsy	..	..	..	..	..	..	7
Deafness	..	..	..	..	..	..	4
Reduction deformities	..	..	..	..	..	..	3
Talipes	..	..	..	..	..	..	3
Mongol	..	..	..	..	..	..	3
Cataracts	..	..	..	..	..	..	2
Hypotonia	..	..	..	..	..	..	2
Other conditions	..	..	..	..	..	..	23
							<hr/> 110 <hr/>

Our local paediatrician, Dr. C. C. Harvey, has given invaluable information in the compilation and maintenance of this register.

DENTAL TREATMENT 1964 FOR MATERNITY AND CHILD WELFARE

The number of patients referred from the Maternity and Child Welfare clinics treated during 1964 at the Local Authority dental clinics continued to fall ; 50 fewer patients being seen than in 1963 and 79 less than in 1962. The falling off in individuals actually treated is mainly from the maternity patients (203 treated compared with 240 in 1963, whereas 343 children under five years old were seen in 1964 compared with 356 in the previous year). There were 1,186 attendances for treatment—only 32 fewer than in 1963—and the number of fillings increased from 123 to 218, while there was a decrease from 1,245 to 1,016 in the number of teeth extracted. The details can be found in the appended tables. Mention might perhaps be made of the four young patients who were supplied with dentures. Three patients required full upper dentures and two of them also had partial lower dentures. That these were needed at all is regrettable but the clinical work involved is interesting and sometimes exciting and the way these small patients adapt themselves to artificial dentures is truly amazing. The tremendous improvement in their appearance is obvious and the good effect upon their digestive tracts and general metabolism at such a time of growth must be very considerable. In order to investigate the effects in the permanent teeth, some children of age ten and over who had full upper and lower or full upper and partial lower dentures between the ages of about 4—7 years were asked to come into the clinic for inspection. From the seven children seen it is not possible to generalise, though three did show a Class III type of occlusion, i.e. their lower jaw was more prominent than usual and perhaps this results from the effect on the growing mandible of chewing with artificial dentures. This is no great detriment and many more cases would need to be examined before one could say that there was any definite connection—indeed these three children

may well have developed Class III types of occlusion in their ordinary growth without ever wearing dentures.

It is proposed to do a detailed charting of the mouths of the majority of school entrants in Rotherham this year, i.e. those children born in 1960. With this information available over a period of years it will be possible to establish definite trends in dental disease and figures will be available for instance for comparing children who have developed their teeth while the drinking water has been fluoridated, with those whose teeth have formed under less favourable conditions ; this is assuming of course that fluoride is eventually added to the drinking water, along with the other substances already added at present.

Until such a measure is taken to improve the calcification of teeth it might be advisable to try and conduct a campaign against the very common practice of sweet eating. This is primarily the duty of the parents, most of whom one imagines are nowadays aware of the advantages to the teeth both of not eating sticky, fermentable carbohydrates between meals and of brushing the teeth and gums regularly. Since there is more publicity given in the papers and magazines and on the television to these cariogenic products than to oral hygiene and brushing of the teeth, any efforts at dental health education by dentists, health visitors and teachers are bound to be uphill work. The increase in sweet eating may be a result of anti-smoking campaigns, though these should hardly directly affect the "under fives! " It is hoped that the scheme whereby the health visitors distribute cards asking the mothers to take their children for a dental inspection after their third birthday will now be resumed, since the dental staff is once again at full establishment and able to undertake any work which may be necessary. Only by regular inspections at, say, six monthly intervals can decay be detected at a sufficiently early stage to allow satisfactory work to be done, for local anaesthetics are not accepted very readily by children under eight or nine years of age. Cavities can usually be cut with diamonds and the high speed drill, in milk molars if caught in the very early stages. It must be remembered that the pulps or "nerves" of milk teeth are relatively larger than in permanent teeth and thus cavity preparation requires greater care, and judgment as to filling material, in the deciduous teeth. A filling in such a tooth, which gives rise to pain shortly afterwards or in which sufficient retention has not been obtained and consequently falls out, does not encourage the patient or its parents to get conservation work done in the future. On the other hand since the milk molars are not normally shed until nine and eleven years, the very beneficial effects of satisfactory fillings in these teeth, in keeping the second teeth in their correct positions in the jaws cannot be too greatly stressed. The too early loss of milk teeth probably accounts for 60 per cent of orthodontic treatment in later school life. Generally speaking a dentist's first chance of seeing an under five year old's teeth is when one requires extraction and though efforts are then made to get any other treatment attended to, it is already somewhat late ; the re-introduction of the third birthday inspection card, enclosing an informative leaflet, may well prove to be not only the first but also the best means of promoting dental health education.

The following table gives details of the treatment given at the dental clinics to expectant and nursing mothers and young children under 5 years of age during 1964.

	Children under five years	Expectant and nursing mothers	Total 1964	Total 1963
Total attendances	484	702	1186	1218
Number of individuals treated	343	203	546	596
Extractions—permanent teeth	—	466	466	660
—temporary teeth	549	1	550	585
Fillings —permanent teeth	—	181	181	92
—temporary teeth	37	—	37	31
Anaesthetics—local	1	116	117	82
—general	259	86	345	427
Other operations	206	598	804	783
Number of patients supplied with dentures ..	4	76	80	86

Details of the denture work done for expectant and nursing mothers and for young children under 5 years of age in 1964 are as follows :

	Maternity		Child Welfare		Total	
	Dentures	Patients	Dentures	Patients	Dentures	Patients
Full upper and full lower dentures	52	26	—	—	52	26
Full upper or full lower dentures	11	11	1	1	12	12
Full upper or full lower dentures along with partial lower or partial upper dentures ..	30	15	—	—	30	15
Partial upper and partial lower dentures	24	12	4	2	28	14
Partial upper or partial lower dentures	12	12	1	1	13	13
	129	76	6	4	135	80

CARE OF THE PREMATURE INFANT

All infants weighing 5½ lb. or less at birth are regarded as premature babies irrespective of the period of gestation.

The following table gives details of the premature births during the year :

				Total births	Premature births	Percentage
Live births	..	..	..	1711	123	7·19
Still-births	..	..	..	29	13	44·83
Total				1740	136	7·82

Of the 136 premature births, 84 live births and 13 still-births occurred in hospital; 39 live births occurred at home of which 5 were transferred to hospital.

Details of the birth weights of these babies are given in the following table which also gives the numbers who died within 24 hours of birth and those surviving at the end of 28 days.

Weight at birth	PREMATURE LIVE BIRTHS												PREMATURE STILL BIRTHS	
	Born in hospital				Born at home or in a nursing home								Born in hospital	Born at home or in a nursing home
					Nursed entirely at home or in a nursing home				Transferred to hospital on or before 28th day					
	Total births	Died within 24 hours of birth	Died in 1 and under 7 days	Died in 7 and under 28 days	Total births	Died within 24 hours of birth	Died in 1 and under 7 days	Died in 7 and under 28 days	Total births	Died within 24 hours of birth	Died in 1 and under 7 days	Died in 7 and under 28 days		
2 lb. 3 oz. or less	5	4	-	-	-	-	-	-	-	-	-	-	2	-
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	6	2	2	-	-	-	-	-	1	-	-	-	2	-
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	20	3	1	-	-	-	-	-	1	-	-	1	5	-
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	14	2	-	-	7	-	-	-	-	-	-	-	3	-
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	39	3	2	-	27	-	-	-	3	-	-	-	1	-
Totals	84	14	5	-	34	-	-	-	5	-	-	1	13	-

The Premature Baby Nurse attended 115 premature babies during the year and made 2,285 visits in connection with these babies.

There were several problems among the babies visited. One, now aged ten months, has spent most of his life in hospital because of failure to thrive and repeated respiratory infections and is at present in hospital again. Three babies had congenital heart anomalies and have already had operation for their condition and are making progress. Another baby, now aged six months, is under observation for a possible heart defect, and visiting continues. There is also a baby with severe talipes, now aged six months, and visiting continues because of home conditions.

There was one death among the babies attended. The baby, aged seven weeks died suddenly as his mother picked him up to feed him. Post mortem examination revealed "bronchiolar obstruction due to acute tracheitis and bronchiolitis." He was having medicine for the infection and was feeding and gaining weight well. The home conditions were extremely hazardous and the baby had already been in hospital twice.

One baby girl was visited until the age of seven months because of the parents' poor capabilities and care. This child is probably mentally retarded. During the time of intensive visiting made to this family the eldest girl, aged three years, was removed to the care of the Local Authority because of actual neglect and rejection by the mother—this child is also mentally retarded.

There were several Pakistani families among the cases attended. These families were most co-operative but needed lengthy demonstration visits because of the language difficulty.

The number of babies other than premature attended by the nurse was 36 and the number of visits in connection with these babies was 341. Two of these babies have congenital enzyme anomalies, one the adreno-genital syndrome. Both babies appear to be thriving at present.

The special clinics for the estimation of haemoglobin levels of the premature babies born at home were continued. There were 12 sessions and the number of tests made were 229.

The number of visits made for other reasons was 209.

Vision tests were carried out on the 4 year old prematures with birth weights of $4\frac{1}{2}$ lbs. and under.

Details of the babies cared for during 1964 were as follows:

	Premature babies	Weakly babies other than premature	Total
In care at the beginning of the year	11	3	14
New cases, 1964	104	33	137
Total infants ..	115	36	151
Infants discharged from care as:			
adjusted	101	29	130
died	1	—	1
transferred out	—	—	—
admitted to hospital	5	4	9
Infants remaining in care at end of the year ..	8	3	11
Visits paid	2,285	341	2,626

ANALYSIS OF CAUSES OF INFANT DEATHS

Age	Cause of death	Number
0-7 days	{ Asphyxia	8
	{ Birth trauma	11
	{ Prematurity	4
	{ Haemolytic disease	2
	{ Congenital abnormalities	2
		27
1-4 weeks	{ Septicaemia	1
	{ Congenital abnormality	1
		2
1-12 months	{ Respiratory infection	6
	{ Congenital abnormality	1
	{ Enteritis	1
		8
		—
		37
		—
All infants	{ Respiratory infection	14
	{ Birth trauma	11
	{ Prematurity	4
	{ Congenital abnormality	4
	{ Haemolytic disease	2
	{ Septicaemia	1
	{ Enteritis	1
		—
		37
		—

CHILDREN'S COMMITTEE—RESIDENTIAL NURSERY AND CHILDREN'S HOMES

All children were examined on admission and discharge from the nursery and a medical inspection of all children took place each month.

Children given triple antigen (diphtheria, whooping cough and tetanus)	11
Children vaccinated against smallpox	—
Medical examinations	442
Visits made by medical officers	85
Visits made by health visitors	27

WELFARE COMMITTEE—TEMPORARY ACCOMMODATION

One new family was given temporary accommodation during the year. There are now 4 families consisting of 5 adults and 11 children in temporary accommodation.

SALE OF WELFARE FOODS

The following table gives details of the sales of Welfare Foods in the County Borough during the last five years :

	1960	1961	1962	1963	1964
National dried milk	39,035	35,734	35,024	32,015	26,578
Cod liver oil ..	6,022	3,913	1,671	1,170	1,049
A and D tablets ..	6,922	5,209	3,388	2,681	2,254
Orange juice ..	61,384	35,323	19,177	16,189	15,556
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
	113,363	80,179	59,260	52,055	45,437
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

MATERNITY SERVICES AND THE DOMICILIARY MIDWIVES SERVICE

MATERNITY SERVICES

The following table shows the number of confinements amongst women normally resident in the County Borough:—

A. SERVICES PROVIDED WITHIN THE COUNTY BOROUGH :—	1960	1961	1962	1963	1964
Moorgate General Hospital	424	432	425	472	490
Private nursing homes	46	35	43	50	42
Domiciliary confinements	730	722	722	706	642
 B. SERVICES PROVIDED OUTSIDE THE COUNTY BOROUGH :—					
The Jessop Hospital, Sheffield ..	23	26	26	23	33
Listerdale Maternity Home	290	337	364	374	443
Hallamshire Maternity Home ..	21	15	14	9	15
Private nursing homes and other Institutions	15	13	32	30	28
Domiciliary confinements	11	10	6	5	12
 Total confinements	1560	1590	1632	1669	1705

The following table gives a picture of the maternity work undertaken in the County Borough:—

Year	Confinements occurring in						Total
	Hospitals Maternity Homes		Private Maternity Homes		Domiciliary arrangements		
	Number	Per cent	Number	Per cent	Number	Per cent	
1957	631	44·00	57	3·97	746	52·03	1,434
1958	640	42·39	60	3·97	810	53·64	1,510
1959	668	45·17	57	3·85	754	50·98	1,479
1960	758	48·59	61	3·91	741	47·50	1,560
1961	810	50·94	48	3·02	732	46·04	1,590
1962	829	50·80	75	4·59	728	44·61	1,632
1963	878	52·61	80	4·79	711	42·60	1,669
1964	981	57·54	70	4·10	654	38·36	1,705

The following statement gives the number of applications for hospital confinement investigated by the midwives and appropriate recommendations made:

	1957	1958	1959	1960	1961	1962	1963	1964
Total number of Rotherham patients confined in Hospital and maternity homes	688	640	668	758	858	904	958	1051
Priority applications reported upon ..	171	141	229	325	258	224	150	188

DOMICILIARY MIDWIVES SERVICE

From January until July there was a serious shortage of staff owing to sickness. Two midwives were off duty for periods of five months and a third midwife for four months. Two of these midwives eventually resigned.

Mrs. M. Carter resigned on 10th May, 1964 and Mrs. J. Fletcher resigned on 8th June, 1964, Mrs. P. M. Abbott commenced duty on 21st June, 1964 and Mrs. R. Addison commenced duty on 1st September, 1964.

The annual inspection of midwives, drugs and records was carried out by Mr. D. Ballantine, Consultant Obstetrician and Medical Supervisor of Midwives.

During the year films have been seen by midwives in connection with midwifery, sick babies and congenital abnormality of babies.

The Non-Medical Supervisor of Midwives gave instruction relating to obstetrics and Local Authority health services to 23 third year nurses in general training.

The East Herringthorpe district was extended to include part of the Brecks housing estate, as housing development was causing the midwife in the Broom district to have a very heavy case load.

Reviewing the domiciliary midwifery services of the County Borough during the same period, which are provided by the Maternity Services Scheme of the Executive Council and the Domiciliary Midwives Scheme of the County Borough Council, the following table gives details of the bookings of patients confined and includes the few non-residents who had their confinement in the County Borough:

Year	Doctor NOT booked for confinement		Doctor booked for confinement		Total
	Number	Per cent	Number	Per cent	
1957	160	21·13	597	78·87	757
1958	197	24·14	619	75·86	816
1959	144	18·92	617	81·08	761
1960	106	14·27	637	85·73	743
1961	79	10·78	654	89·22	733
1962	59	8·03	676	91·97	735
1963	41	5·75	672	94·25	713
1964	37	5·72	610	94·28	647

It will be seen that whereas in 1957 78.87 per cent of the women confined at home booked their confinement with a doctor, during subsequent years this has progressively increased until in 1964 the percentage has increased to 94.28 per cent. Bookings for a midwife only show the reverse by decreasing from 21.13 per cent in 1957 to 5.72 per cent in 1964.

The effect of the increased bookings by doctors upon the work of the District Ante-natal Clinics is reflected in the decrease in the numbers of women attending and in the total attendance made:

				1957	1958	1959	1960	1961	1962	1963	1964
				—	—	—	—	—	—	—	—
Women attending	...	...	...	283	284	238	209	175	141	111	99
Attendances	...	...	...	513	567	504	418	386	296	247	206

Attendances at clinics attended by district midwives:

				1957	1958	1959	1960	1961	1962	1963	1964
				—	—	—	—	—	—	—	—
Attendances	...	...	...	2876	2948	3004	3246	3488	3673	3649	3534

The midwives refer all their booked cases to the district ante-natal clinics which are attended by a consultant obstetrician (Mr. D. Ballantine, M.R.C.S., F.R.C.O.G.) who acts as the Corporation's Obstetric Officer. Reports of his examination are sent to the patient's own doctor and sometimes result in the cases being booked by the doctor. Midwives hold sessions at the clinics at which their own booked cases and cases booked by a doctor attend with the doctor's permission.

A further obligation which the Domiciliary Midwives Service has undertaken in recent years is the nursing care of hospital maternity cases who have been discharged home before the tenth day. The following table gives details :

	1957	1958	1959	1960	1961	1962	1963	1964
Total (County Borough) hospital confinements	631	640	668	758	810	829	878	981
Hospital discharges before the 10th day ...	425	541	586	429	276	367	404	549
Percentages ...	67.35	84.5	87.7	56.59	34.07	44.27	46.01	55.96

Patients who were booked and delivered by midwives were encouraged to attend for examination at the post-natal clinic held jointly with the district ante-natal clinic, and the details of midwives cases delivered, and cases attending and attendances at the post-natal clinic, are as follows :

Year	Midwives bookings delivered	Midwives cases attended post-natal clinic		Post-natal attendances
		Number	Per cent	
1957	160	65	40.6	75
1958	197	62	31.5	71
1959	144	54	37.5	67
1960	106	51	48.1	57
1961	79	30	37.9	35
1962	59	36	61.0	41
1963	41	21	51.2	25
1964	37	15	40.5	22

Domestic help is provided to maternity cases under the Act and the following table summarises the assistance rendered by the Home Help Service during the years 1957-1964.

Year	Number of domiciliary confinements	Maternity cases served by Home Helps		Hours of service rendered	Average hours per case
		Number	Per cent		
1957	737	138	18.7	12,040	87.2
1958	810	144	17.7	11,914	82.7
1959	754	128	16.9	11,319	88.4
1960	741	135	18.2	11,443	84.8
1961	732	138	18.8	11,441	82.9
1962	732	144	19.6	10,945	76.0
1963	712	176	24.7	13,469	76.5
1964	647	164	25.3	13,383	81.6

The domestic assistance given by relatives during the lying-in period should not be overlooked and many cases receive help from this source. The services of the home help during the ante and post-natal periods which are provided on medical certificate, are included in the above figures.

EXPECTANT AND NURSING MOTHERS.

Of the 432 expectant mothers who attended mothercraft and relaxation classes 61 were booked for home confinement. A total of 3,103 attendances were made. Publicity was given to the classes by family doctors, hospital staffs, midwives and health visitors. A number of women attended from other areas.

DISTRICT ANTE-NATAL AND POST-NATAL CLINICS.

The following table gives details of the attendances at the consultant ante-natal clinics during 1964:

Clinics	Sessions held	New cases		Total women attending		Total attendances	
		A.N.	P.N.	A.N.	P.N.	A.N.	P.N.
Ferham House ..	12	38	2	39	2	56	2
Cranworth Road ..	22	35	11	41	11	109	17
Kimberworth Park	12	17	2	19	2	41	3
Total ..	46	90	15	99	15	206	22

POST GRADUATE COURSES.

Mrs. McGann attended a course in London and Miss Atkinson attended a course in Liverpool from 12th-18th April. Mrs. Ellis attended a course in Oxford from 20th-26th September. Four midwives attended a study day held at the Jessop Hospital for Women, in Sheffield, on 16th November, 1964.

PUPIL MIDWIVES.

Three pupil midwives who commenced training in 1963 passed their examination in 1964. Of five pupils who received training in 1964, four passed and one failed the examination, making a total of seven passes out of eight.

One pupil who failed her examination in 1963 was successful in 1964.

HOSPITAL LIAISON.

Maternity liaison meetings have been attended during the year and frequent visits have been made by the Non-Medical Supervisor of Midwives to Moorgate General Hospital and Listerdale Maternity Home to discuss hospital priority and 48 hour discharges.

District midwives and home nurses attended 549 mothers discharged from local maternity hospitals and maternity homes before the tenth day, equal to a saving of 3,022 patient days. A number of these cases were booked with the domiciliary service, but were admitted to hospital for medical reasons or in emergency, and returned home to the care of the midwife concerned as soon as the emergency was over. 261 patients were discharged from hospitals on the first or second day as compared with 180 in 1963.

The following table shows the number of maternity patients who were discharged from hospital prior to the tenth day:

Hospital or Maternity Home	Discharged on the (day)										TOTAL
	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	
Moorgate General ..	15	82	26	16	9	10	15	18	33	1	225
Listerdale Maternity ..	—	155	8	12	10	5	20	24	42	10	286
Hallamshire Maternity ..	—	1	—	—	—	—	—	2	1	—	4
Jessop, Sheffield ..	—	2	1	—	1	5	7	5	2	—	23
City General, Sheffield	—	6	—	2	1	—	—	—	—	—	9
Mexborough Montagu ..	—	—	—	1	—	—	—	—	—	—	1
Billinge Hospital, Wigan	—	—	—	—	—	—	—	—	1	—	1
TOTAL ..	15	246	35	31	21	20	42	49	79	11	549

VISITS BY MIDWIVES TO ASSESS HOME ENVIRONMENT

(a) For admission to hospital

The midwives completed reports on 188 applications for hospital admission. Taking into account the environmental conditions 159 cases were recommended for hospital confinement (36 for ten days stay and 123 for early discharge), and 29 were suitable for home delivery. This work required 202 visits.

(b) For discharge from hospital.

Of 262 patients who were visited to ascertain their suitability for discharge 48 hours after confinement in Listerdale Maternity Home or Moorgate General Hospital 12 were not so recommended. 459 visits were made.

One patient who was discharged from hospital 48 hours after confinement had a secondary post-partum haemorrhage and was returned to hospital.

MATERNITY EMERGENCY UNIT

The unit was called upon three times during the year, on each occasion for post partum haemorrhage. The patients were transfused in their own home and then removed to hospital. Each patient recovered very well.

ANALGESIA

Analgesia was administered to patients by the use of gas and air, Trilene, Pethidine and Pethilorfan. Two Minnitt's gas and air machines were serviced quarterly and 16 Tecota Trilene machines were serviced once during the year.

	Doctor NOT booked	Doctor booked	TOTAL
Analgesia —Number of cases who were delivered with :			
Gas and air only ..	—	1	1
Pethilorfan only ..	1	18	19
Trilene only	9	211	220
Pethidine and Trilene ..	11	113	124
G/A and Pethilorfan ..	—	1	1
Pethidine only	—	8	8
Pethilorfan and Trilene	10	213	223
Pethilorfan, Pethidine and Trilene	—	2	2
Cases delivered without analgesia ..	6	43	49
TOTAL ..	37	610	647

PREMATURE BABY COTS.

Cots were loaned on seven occasions for the use of sick and premature babies.

MIDWIVES CASE LOAD.

	1960	1961	1962	1963	1964
Number of domiciliary cases attended by					
Municipal midwives	743	733	735	713	647
Private Midwives	—	—	—	—	—
Number of cases delivered in Institutions, but attended by domiciliary mid- wives on discharge from Institu- tions before the 10th day	429	276	367	404	549
Number of days service to such cases representing a similar saving of patient days in institutions	1890	1091	1680	2255	3022

Of the 647 cases attended by midwives, 643 had booked their confinement with the service, 4 cases were delivered in emergency, and there were no miscarriages.

A total of 635 cases were delivered by midwives who also acted in the capacity of maternity nurses to 211 patients.

One case was handed over to the Home Nursing Service on account of infection or suspected infection in the baby.

The following table gives details of the domiciliary confinements during the year :

	Doctor NOT booked	Doctor booked	TOTAL
Midwives booked cases ..	37	606	643
Emergencies	—	4	4
Miscarriages	—	—	—
TOTAL ..	37	610	647

MATERNAL DEATH.

There was one maternal death, a lady with three living children who, five weeks before her expected confinement, developed an acute, fulminating gastro-enteritis, probably due to a virus infection. After delivery of a still-born infant at Moorgate General Hospital she was transferred to Lodge Moor Hospital but died two days later.

MIDWIVES CLINICS.

The Kimberworth Park Ante-natal Clinic was transferred to new premises at Wheatley Road on 23rd November, 1964.

The number of attendances at midwives ante-natal clinics held at centres during the year is as follows :

	Ferham House	Cranworth Road	Broom Lane	Greasbrough	Wheatley Road	Total
Number of sessions held ..	203	158	53	12	106	532
Number of new cases attending	283	257	67	39	151	797
Re-attendances	921	823	223	71	527	2565

FAMILY PLANNING ASSOCIATION.

A branch of the Family Planning Association was formed in Rotherham in February, 1956. The following statistics are given for the year 1964, the figures for the preceding year are given in brackets :

Number of new patients	...	...	...	...	...	231	(304)
Number of second visits	...	...	...	...	...	236	(320)
Number of check visits	...	...	...	...	...	743	(747)
Number of transfers	...	...	...	...	...	31	(43)
Attendances for supplies only	...	...	...	...	...	778	(959)
Total number of attendances made	...	...	...	...	...	1988	(2450)
Patients buying by Post	...	...	...	...	...	266	(341)
Patients recommended by Health Committee	...	...	...	...	...	19	(39)
Patients supplied with oral contraceptive	...	...	...	...	...	28	(—)

HEALTH VISITING

HEALTH VISITORS AND SCHOOL NURSES

Mrs. A. W. Harper, Health Visitor, left the department in March, 1964. Three student health visitors were appointed and commenced their training in October 1964, two at Leeds University and one at Hull University. Unfortunately the student at Hull resigned due to ill health. One part time clinic nurse was appointed. Three women, not nurses, were appointed on a part time basis to assist with infestation inspections in schools and to clean up verminous children at clinics.

110 children attended the Play Centre during the year and made 652 attendances compared with 111 children making 682 attendances the previous year.

Special arrangements were made with the Children's Department for 10 children who were to be adopted to have blood specimens taken and Phenystix tests done.

Routine phenylketonuria tests were done on 1,351 babies during the year. One baby born in November, 1964, was found to have a positive reaction to the test. This is the first positive test out of 6,687 carried out. The baby was admitted to the Children's Hospital, Sheffield, for treatment.

Home background reports were supplied at the request of the Consultant Paediatrician and almoners of Sheffield hospitals.

The case load for 1964 was:

Infants under 1 year on visiting list	..	..	..	1,500
Infants 1-2 years	..	..	..	1,632
Infants 2-5 years	..	..	..	4,077
Tuberculous patients	..	..	..	420
Diabetics	..	..	..	102
Gastrics	..	..	..	78
Chronic sick	..	..	..	65

SCHOOL NURSING.

The school nurses have carried out the duties in connection with school work generally, with the help of clinic assistants and clinic nurses.

The total case load for 1964 was as follows :

Number of school population	..	..	..	15,016
Number of nursery schools	..	..	..	1
Number of schools with nursery classes	..	..	..	4 (5 classes)
Number of voluntary primary schools	..	..	..	2
Number of primary schools	..	..	..	18
Number of general secondary schools	..	..	..	6
Number of voluntary secondary schools	..	..	..	1
Number of secondary grammar schools	..	..	..	2
Number of special schools:				
Open air school	..	..	..	1
Educationally subnormal school junior and senior	1			2

SOCIAL CASE WORK

CARE OF THE UNMARRIED MOTHER.

Eighty-nine illegitimate babies were born, 50 to 50 single girls and 39 to 38 married women, as compared with 46 to 46 single girls and 37 to 35 married women in 1963.

Nine girls were admitted to Mother and Baby Homes, the local authority accepting financial responsibility. Three of their babies were adopted, one was placed in a Children's Home and three remained with their mothers.

Ten single girls were cohabitees, 8 had their confinements in hospital and 2 were confined at home. One baby was adopted and 9 remained with their mothers.

Of the remaining 33 single girls 29 had their confinements in hospital and 4 were confined at home. Three babies were adopted, 2 were placed in Children's Homes, 3 babies died, and 25 remained with their mothers.

One girl mentioned above was in her fifteenth year when her baby was conceived.

Of the 38 married women 23 were cohabiting, 10 were separated from their husbands, 3 were widows and 2 were divorced. There was one set of twins. 31 babies remained with their mothers, 2 were adopted, one was fostered, 3 were placed in Children's Homes and 2 babies were stillborn.

PREVENTION OF BREAK-UP OF FAMILIES.

PROBLEM FAMILIES.

The picture of a problem family is generally well known and may be defined as "a home where standards have become dangerously low, that is so low that there is a danger to the health, even to the life of the children within it." Usually furnishings are few and dilapidated and the bedding is almost non-existent. There is seldom any food to be found. Food is usually purchased for each meal at the corner shop, if they have any money, or their credit is still good. The family is often large and there is commonly poor personal hygiene.

Of the 31 families dealt with, supervision was necessary by the N.S.P.C.C. Inspector in 10 cases. Most of these families have required continued frequent visiting and there are still many problems in these households. Five of these families had neither electricity nor gas, the services having been cut off for non-payment or breaking into the meters. The remaining 21 families fluctuate. Occasionally there is marked improvement but they quickly revert to type. Most of these families were without gas or electricity at some time during the year and the majority have heavy debts.

PRE-PROBLEM FAMILIES.

Twelve families in this group were given special supervision during the year. All received help in kind and were visited frequently in an attempt to prevent them falling into the problem family group. These families need concentrated visiting and support in the smallest crisis.

SPECIAL CLINIC.

Follow-up work has been carried out, as usual, from this clinic on 55 occasions.

HEALTH WEEK

THE MULTI-SCREENING CLINIC.

It has been estimated that upwards of 5 million people in this country are unwittingly tolerating ill-health. Simple, quick and reliable tests for some of the hidden diseases have therefore been developed in recent years, chest radiography being the first to gain general acceptance. When, in 1962, a method of self-testing for diabetes was offered in conjunction with the chest X-ray, the public response was greater than could have been expected for either test alone.

Plans for a multi-screening clinic, offering a battery of 5 tests for chest diseases, diabetes, anaemia, deafness and cancer of the neck of the womb, came to fruition in the borough's Health Week, held from 16th-21st November in the Assembly Rooms.

The total attendance for the week was 3,753, far higher than anticipated and almost overwhelming at times. It may be that the public deem it particularly worthwhile to come for a multiplicity of tests or, alternatively, that each is attracted by one test in particular but also takes the others. Whatever the reason, the attendance and the many encouraging comments received made the effort involved worthwhile.

Among the 2,824 persons X-rayed, 99 abnormalities were discovered including 10 cases of tuberculosis (3 active). 5,673 diabetic test packets were issued and 116 persons reported positive tests. Those with confirmed glycosuria underwent glucose tolerance tests at the hospital laboratory and 8 were diagnosed as diabetic.

The gravimetric test for anaemia, which detects those with less than 80 per cent. haemoglobin (Haldane), was carried out by a technician kindly loaned by the Regional Transfusion Centre at Sheffield. 73 per cent of those attending were tested and 178 (6.49 per cent) proved positive, all but 19 of them female.

The hearing test was conducted in a sound-proof box using a pure-tone audiometer. Of the 1,184 persons who took the test, 251 (21.2 per cent) failed, that is, had a hearing loss greater than 25 decibels at any frequency. Most of these had either a very minor degree of defective hearing or were unlikely to benefit from treatment. However 30 patients for whom there appeared to be reasonable prospects of securing

improvement in hearing were referred to general practitioners and reports were furnished on a further 22 cases.

The demand for cervical cytology very nearly exceeded the capacity of the clinic. More staff were brought in and eventually 1,369 smears were taken. Eight of these (5.8 per 1,000) proved positive. Thirty unsatisfactory or doubtful smears were repeated and most of these have now been cleared. A number of other gynaecological conditions were discovered incidentally and 85 patients were referred directly to general practitioners.

The success of the clinic was most encouraging and achieved wide publicity. It is hoped to hold a further clinic on similar lines during 1965.

SUMMARY OF STATISTICS

Test for	Number of persons examined	Referred for investigation or treatment	
		Number	Per 1,000 examined
Anaemia	2,743	178	64.9
Diabetes	5,673	8*	1.4
Chest diseases	2,824	99†	35.1
Hearing	1,184	30	25.3
Cervical carcinoma ..	1,369	8	5.8

* 1 severe diabetic, 4 moderate, 3 mild.
† includes 3 active and 7 inactive cases of tuberculosis.

This venture would not have been possible without the generous assistance and co-operation of local consultants and general practitioners; this is gratefully acknowledged. Special thanks are due to the consultant responsible for the examination of the cervical smears. It may be noted that the standard charge for taking and examining a smear in Harley Street is 6 guineas!

THE ANTI-SMOKING CLINIC.

Since the publication of the report by the Royal College of Physicians in 1962, responsible medical opinion has united in advocating a gross reduction in our personal and national cigarette consumption. It is futile to pretend that the few thousand pounds spent on propaganda by local authorities and the Central Council for Health Education, when ranged against the tobacco companies' millions, will bring about any marked changes.

There are three other requirements in a national campaign. Firstly immediate positive action by the government to reduce cigarette advertising—and there are signs that this is forthcoming. Secondly some form of psychological persuasion, based on what the Royal College called “altering social acceptance of the habit.” When it finally becomes unfashionable, unmanly and ill-mannered to smoke, the motivation for starting and continuing the practice will disappear.



Multiple Screening Clinic. Haemoglobin estimation carried out by technician from National Blood Transfusion Service



Multiple Screening Clinic Hearing Test

The third requirement is a parallel course of personal instruction, advice and encouragement on how to give up ; without this, widespread excessive anxiety may result from knowledge of the dangers of smoking and the inability to stop. The 5-day treatment was an attempt to meet the demand for such a course in Rotherham. It consisted of lectures and discussions by a minister-physician team, films about the harmful effects of smoking on body and mind and the mutual exchange of experiences by participants. A “five-day plan” booklet explained how to relax, to avoid familiar spots or activities that might lead to a smoke, when to exercise and how to breathe, when to eat and with whom. and even what to think. A “buddy” or partner system similar to that used by Alcoholics Anonymous was a vital part of the programme.

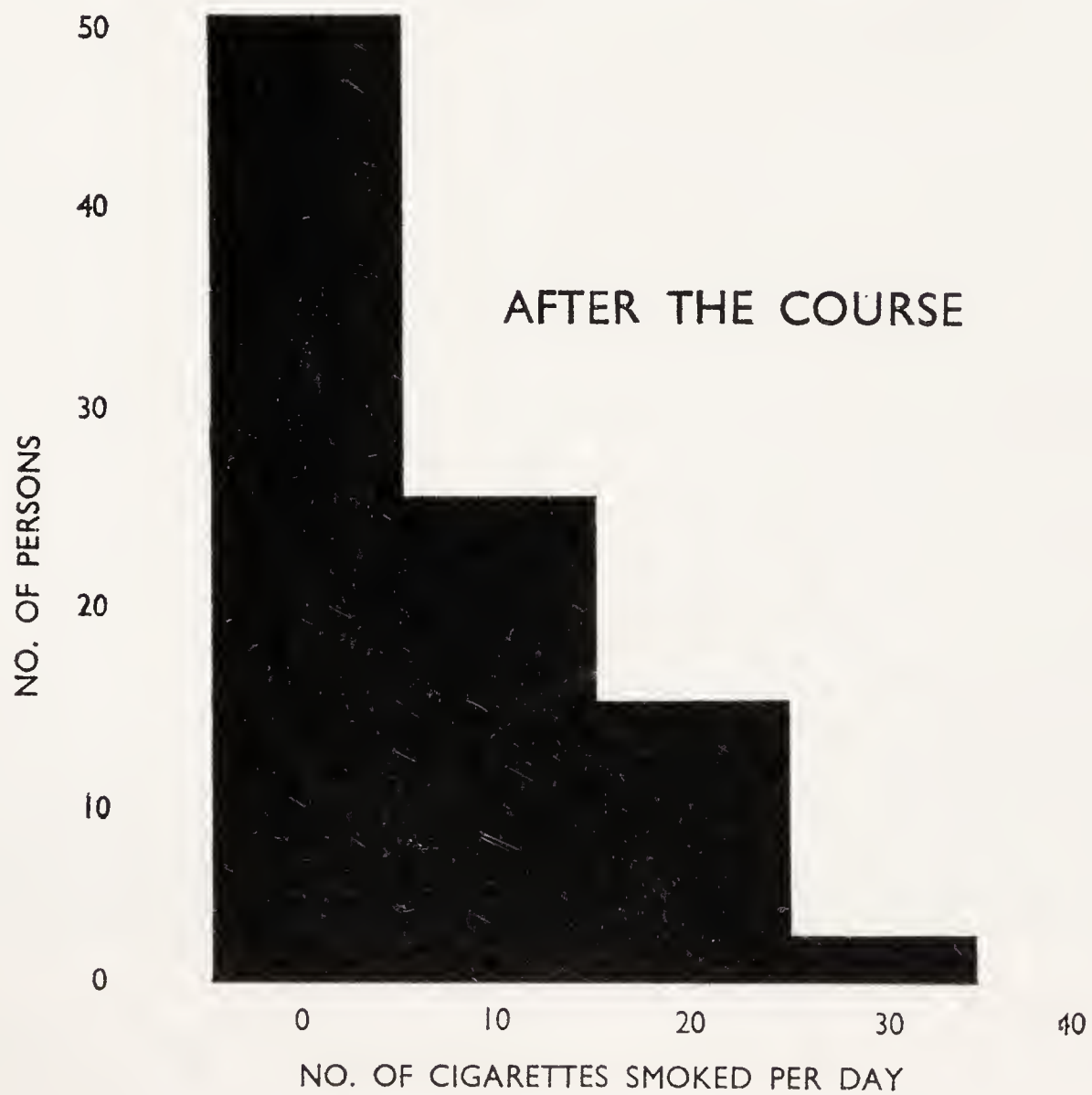
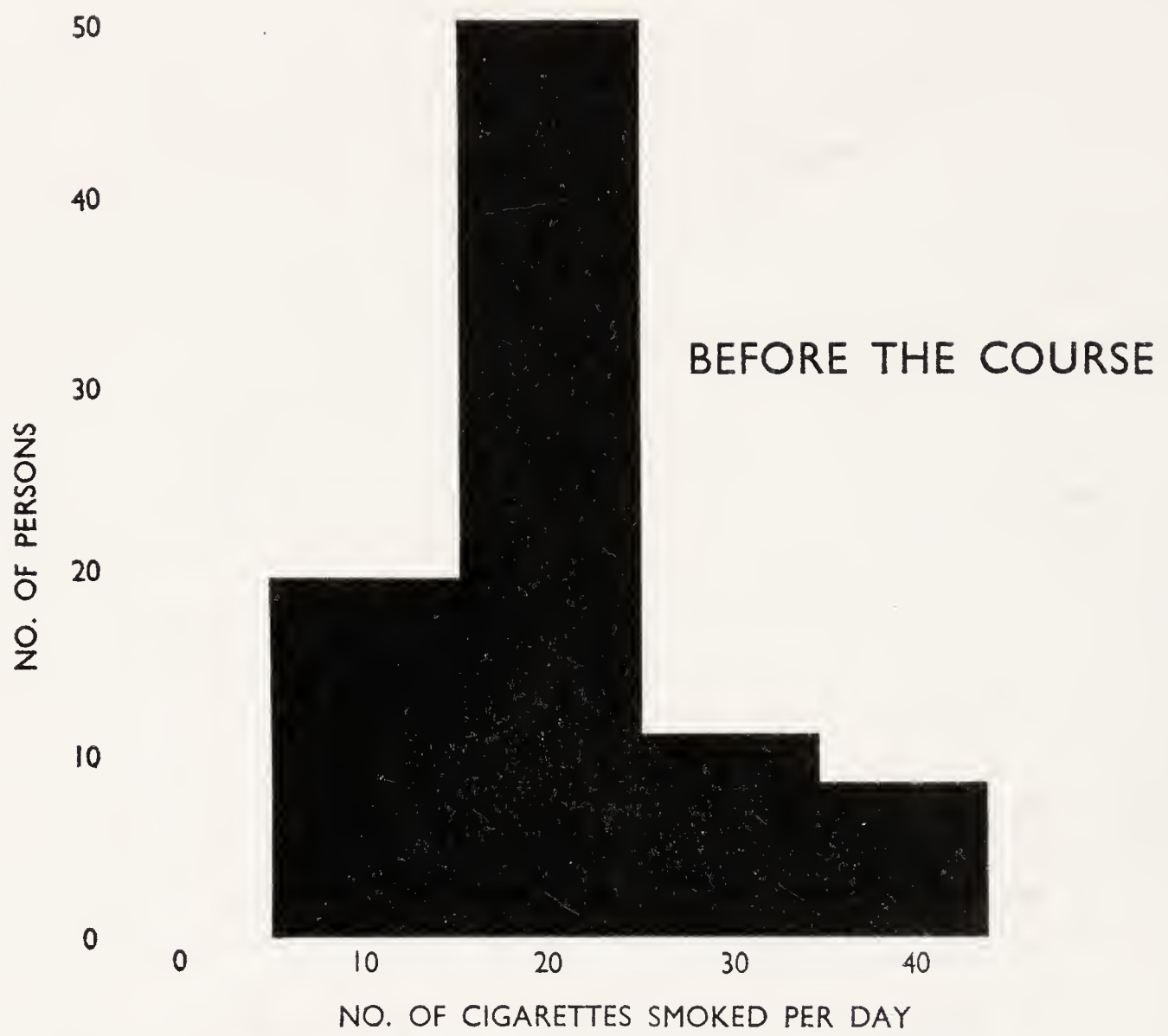
Much of the success of the course can be attributed to the strong personality of the leader of the British Temperance Society team, Mr. Bernard Kinman. At crucial moments in the course he exhorted the audience to their utmost efforts, at the same time collecting unsmoked cigarettes from their pockets.

108 persons completed the course. At the time of the reunion, 8 weeks later, 44 persons had stopped smoking, 48 were still smoking and 16 did not reply. At least 40 per cent were cured and a further 40 per cent reduced their consumption, in many cases to a considerable extent, as the accompanying histogram and figures show.

NUMBER OF CIGARETTES SMOKED PER DAY
BEFORE AND AFTER THE 5-DAY TREATMENT

		AFTER TREATMENT					TOTAL
		35+	25 -34	15 -24	5 -14	0 - 4	
BEFORE TREATMENT	35+	0	2	4	0	2 (1)	8
	25 -34	0	1	4	1	5 (5)	11
	15 -24	0	0	6	17	31 (26)	54
	5 -14	0	0	0	6	13 (12)	19
	0 - 4	0	0	0	0	0	0
TOTAL		0	3	14	24	51 (44)	92

(Figures in brackets refer to non-smokers alone)



GENERAL STATISTICS

The following is a summary of the work performed by health visitors and clinic nurses under Sections 22, 24, 26, 28 and 51 of the National Health Service Act, 1946:

EXPECTANT MOTHERS

First visits to expectant mothers	..	261
Revisits	.. .. .	78
Contacts with social agencies on behalf of mothers	.. .. .	30
Arranging convalescence	.. ..	6
Visits to maternity wards	.. ..	52

YOUNG CHILDREN (first visits paid after the birth of the child)

Still births:

Hospital and nursing home confinements	19
Domiciliary confinements	3

Live births:

Hospital and nursing home confinements	..	..	..	915
Domiciliary confinements		..		580

CHILDREN UNDER 1 YEAR

Premature babies—nurses' supervisory visits	..	..	..	2,285
General routine visits		..	..	5,040
Illegitimate	..	..	..	201
Ill-cared for	..	..	..	91
Death enquiries	..	..	..	29

CHILDREN 1-5 YEARS

General routine visits	1-2 years	..	3,472
	2-5 years	..	5,864
Illegitimate,	1-2 years	..	96
	2-5 years	..	111
Ill-cared for	1-2 years	..	70
	2-5 years	..	134
	over 5 years	..	164
Found on the area (and not known to have been visited before)		..	544
Contacts with social agencies		..	254

SOCIAL ENQUIRIES FOR ALMONERS,
SHEFFIELD HOSPITALS

First visits	..	..	..	..	18
Revisits	..	..	..	..	32

FOLLOW-UP VISITS, HOSPITAL PATIENTS OTHER THAN CHILDREN

First visits	..	..	..	..	30
Revisits	..	..	..	..	31

TUBERCULOSIS

First visits to patients	..	..	28
Revisits	..	..	350
Attendances at Chest Clinic		..	33
Contacts	..	..	188

OTHER INFECTIONS AND INFESTATIONS

Total visits	..	..	..	..	435
Contact swabbing	..	..	..	..	26

HOSPITAL FOLLOW-UP—CHILDREN

0-15 YEARS

First visits	..	..	..	..	369
Revisits	..	..	..	..	367
Attendances at paediatric clinics	..				80

SOCIAL CASE WORK

Visits paid to homes	..	..	78
Cases referred to N.S.P.C.C.	..	..	31
Other social contacts	..	..	17
Interviews, etc.	..	..	422
Attendances, V.D. clinic	..	..	21
Visits, V.D. follow-up	..	..	55

MISCELLANEOUS

Ineffective visits	..	..	..	3,911
Other visits not included above	..		..	1,109
Nursery classes	..	..	..	18
Child guidance clinics	..		..	36
Psychiatric visits	..	..	..	88
Home visits—school children	..		..	390

DUTIES DELEGATED BY THE CHILDREN'S COMMITTEE

Visits to Oakwood Grange Nursery 23

DUTIES DELEGATED BY THE WELFARE COMMITTEE

Hygiene surveys—temporary accom-				
modation at The Mount	1			
Visits paid to separate families in				
accommodation	8			

HEALTH EDUCATION

Mothercraft and Health Education	
talks, clubs, clinics, and schools ..	312
Talks to outside organisations ..	10

HOME NURSING

STAFF.

During the year there have been several changes in the staff. Four students completed training in 1963 and took the examination in 1964. Two staff students and two Doncaster students completed training in December, 1964. Of these, one Doncaster student and one staff student are waiting to take the examination in January, 1965.

Mr. J. M. Jeffs resigned to work in hospital, two Queen's nurses left for personal reasons and two Queen's nurses left to work in other areas.

Eight members of the staff are using cars to get around the districts. This has made the work much easier, particularly on the busy districts such as Blackburn, Kimberworth Park, Greasbrough and Clifton, where the relief nurses can take some of the case load each morning, especially when there are a number of patients who must be seen early.

The following table gives details of the nursing staff employed in the Home Nursing service during the past five years:

	Number of staff employed on 31st December				
	1960	1961	1962	1963	1964
FULL-TIME STAFF :					
Superintendent	1	1	1	1	1
Assistant Superintendent	—	1	1	1	1
Senior Nurse	1	—	—	—	—
Queen's Nursing Sisters—Female	12	14	12	16	16
Male	1	1	1	1	—
Queen's Nursing Candidates—Female	6	2	1	3	1
Male	—	—	—	—	—
State Registered Nurses—Female	1	1	2	1	1
SUB-TOTALS ..	22	20	18	23	20
PART-TIME STAFF :					
Queen's Nursing Sisters—Female	4	6	3	2	3
State Registered Nurses—Female	3	2	2	3	2
State Enrolled Assistant Nurses—Female	1	1	1	—	—
SUB-TOTALS ..	8	9	6	5	5
TOTAL STAFF	30	29	24	28	25
Equivalent to full-time staff	27	26	22	26·3	23·3

GENERAL NURSING.

There has been a decrease in the number of patients nursed and visits paid during the year, due possibly to the use of oral antibiotics by the general practitioners, who formerly requested a nurse to visit daily and often twice daily to give injections. In fact it has been rather noticeable that we have been getting many more heavy nursing cases over the past year and much more time is required to attend to the patient. Also more emphasis is placed on the rehabilitation of as many people as possible, e.g. giving nursing care and getting them up and dressed and helping to walk, etc. Without the co-operation of the home helps in many homes, the nurses could not manage to do this.

Appreciation is expressed to the staff of the Home Help Service for their never failing help with the washing—particularly washing from some of the very incontinent patients—which in most instances is collected and returned on the same day. This service has turned what were “nightmares” for a few nurses into almost pleasant visits!

At the commencement of the year 426 cases were brought forward and 1,599 were referred during 1964, making a total of 2,025 patients nursed.

The 1,599 new cases reported during the year were of the following types:

Medical	1,043	Maternal complications	22
Surgical	361	Maternity cases—mothers	—
Infectious diseases	16	babies	—
Tuberculosis	33	Others	124

They were referred by:

General Practitioners	1,199	Health Dept. Services	11
Hospitals	237	Personal Applications	152

The total cases nursed during the year was 2,025, which was 139 less than those nursed in 1963, and the total of 78,320 visits paid during the year was a decrease of 4,000.

At the end of the year 415 cases were carried forward and during the year 1,610 patients were removed from the register for the following reasons:

Convalescent	..	..	..	..	..	..	..	1,039
Died	..	..	..	..	..	..	..	197
Hospital admissions	..	..	..	..	..	..	..	242
Transferred to other districts	..	..	..	..	..	..	..	87
Removed for other causes	..	..	..	..	..	..	..	45

The following is a summary of the cases nursed and visits paid during the last five years:

	Total cases nursed	Visits	Average daily visits paid
1960	3,156	85,292	233·0
1961	2,293	79,129	216·8
1962	2,205	80,635	220·9
1963	2,164	82,320	225·5
1964	2,025	78,320	214·0

The classification and age of all cases nursed and the visits paid during the year were as follows:

	AGE GROUPS					Total cases
	Under 1 year	1- 4 years	5-14 years	15-64 years	65 yrs. & Over	
CASES :						
Medical	26	19	24	503	802	1,374
Surgical	3	8	18	258	127	414
Infectious diseases	2	6	4	3	1	16
Tuberculosis	-	-	-	57	6	63
Maternal complications	-	-	-	23	-	23
Maternity (mothers and babies) ..	1	-	-	-	-	1
Others	4	4	5	42	79	134
TOTAL CASES NURSED	36	37	51	886	1,015	2,025
VISITS PAID :						
Medical	207	251	279	16,370	32,967	50,074
Surgical	18	77	276	7,366	8,069	15,806
Infectious diseases	32	50	30	19	5	136
Tuberculosis	-	-	-	9,201	740	9,941
Maternal complications	-	-	-	284	-	284
Maternity (mothers and babies) ..	10	-	-	-	-	10
Others	62	156	162	236	1,453	2,069
TOTAL VISITS	329	534	747	33,476	43,234	78,320

At the beginning of the year 4 sick children under the age of 15 years were brought forward; there were 120 new children during the year, making a total of 124, a decrease of 69 cases as compared with last year. The total number of visits paid was 1,610 as against 2,022 the previous year, a decrease of 412 visits.

During the year 104 cases were removed from the register when convalescent, 12 went to hospital, 3 removed to other districts, there were no deaths and 5 remained on the books at the end of the year.

MATERNITY CASES.

There was one baby brought forward at the beginning of the year and no new babies were cared for during the year. The total number of visits was 10. The case was taken off the books after the tenth day.

CARE OF THE AGED.

The number of aged sick remains very much as last year. There were 271 remaining from 1963 and 744 new cases, making a total of 1,015 cases, with 43,234 visits paid—a decrease of 1,881 visits.

Reasons for removal from the register:

Convalescent	380	Removed for other causes ..	65
Hospital admissions ..	154	Remaining	265
Died	151		

STERILE SUPPLY FOR DISTRICT NURSES.

This service is now well established. Apart from minor alterations in the design of packs there has been no change in the method as described in detail in the 1963 Report.

VACCINATION AND IMMUNISATION

SMALLPOX VACCINATION.

During the year records were received of 721 persons who were vaccinated or re-vaccinated. Details of these are given in the following table :

	Under 1 year	1 to 2 years	2 to 4 years	5 to 14 years	15 years or over	Total
Vaccinations ..	19	298	83	26	75	501
Re-vaccinations ..	—	—	7	36	177	220

Of these the records of 364 persons were received from private medical practitioners and the remainder from the Corporation's medical officers at the various clinics in the borough.

No cases were reported during the year of generalised vaccinia or post-vaccinal encephalomyelitis, nor were there any deaths from complications of vaccination.

DIPHTHERIA, WHOOPING COUGH AND TETANUS IMMUNISATION.

The following table gives details of the immunisations carried out during the year :

Children who completed their primary immunisation :

Triple antigen (diphtheria, whooping cough and tetanus) ..	1381
Diphtheria and tetanus antigen	98
Tetanus only	675
Diphtheria and pertussis	1
Total ..	2155

Stimulation doses	632
---------------------------	-----

540 records of immunisation and stimulating doses were received from general practitioners.



Wheatley Road Clinic, Kimberworth Park

The age groups of the children at the time of immunisation were as follows :

	Under 1 yr.	1-4 yrs.	5-14 yrs.	Total
Number of children who— completed a full course of primary immunisation ..	1226	194	60	1480
received a secondary (re- inforcing) injection ..	—	127	505	632

The position at the end of the year in Rotherham regarding immunisation in relation to the child population is given in the following table which gives details of all children who had completed a course of immunisation at any time before that date :

Age at 31.12.64 i.e. born in year	Under 1 yr. 1964	1-4 yrs. 1963-1960	5-9 yrs. 1959-1955	10-14 yrs. 1954-1950	Under 15 yrs. total
Last complete course of injections whether primary or booster.					
1960-1964	600	4893	3775	797	10065
1959 or earlier	—	—	1739	4695	6434
Estimated mid-year child popu- lation	1650	6250	13300		21200
Immunity Index	36·3	78·3	34·4		47·4

At the end of the year 12,086 children under 15 years had been immunised against whooping cough. The following table gives details of the age groups of these children.

1950 — 642	1955 — 870	1960 —1040
1951 — 629	1956 — 866	1961 — 544
1952 — 700	1957 — 857	1962 — 657
1953 — 807	1958 — 897	1963 —1251
1954 — 822	1959 — 909	1964 — 595
<hr/>		
Totals — 10-14 years 3,600	5-9 years 4,399	0-4 years 4,087
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B.C.G. VACCINATION.

B.C.G. vaccination against tuberculosis was continued to the 13 plus age group. Of 1,311 children of this age attending school in the County Borough consent was received from the parents of 1,120, an acceptance rate of 85.4 per cent. As a result of the Mantoux tests 725 children were subsequently vaccinated during the year with B.C.G. The percentage of children tested who were positive was 18.0. 162 children received B.C.G. vaccination in 1964 under the B.C.G. scheme for contacts. Of these, 40 were done during their stay in Listerdale Maternity Home, the remainder were given at the Chest Clinic. Two babies were admitted to Oakwood Grange Nursery for a period of isolation following B.C.G. vaccination.

ROUTINE B.C.G. VACCINATION OF SCHOOL CHILDREN.

Number of eligible children	1311
Total consents received	1120
Acceptance rate	85.4%
Of those 204 children for whom consent was not obtained 25 were known to have had B.C.G. or attended the Chest Clinic as contacts or cases.	
Number of children negative to Heaf test	725
Number of children positive to Heaf test	160
Percentage of positive reactors	18.0%
Of the 160 Heaf positive children 2 were found to have had B.C.G. or attended the Chest Clinic as contacts.	
Number of children given B.C.G.	725
Total number of absentees	183

POLIOMYELITIS VACCINATION.

During 1964, 5,700 Sabin oral vaccine doses were given, a total of 25,498 doses since its inception in 1962.

Sabin (Oral) Vaccine (commenced in March, 1962)						
Dose	Year of birth				Expectant mothers	Total
	1964-59	1958-48	1947-43	Before 1943		
First	4,375	677	94	1,354	19	6,519
Second	3,978	567	79	1,138	19	5,781
Third	4,915	1,191	228	3,893	21	10,248
Fourth	194	2,473	83	48	—	2,798
Fifth	1	151	—	—	—	152
	13,463	5,059	484	6,433	59	25,498

Number of doses of oral vaccine given in 1964 :

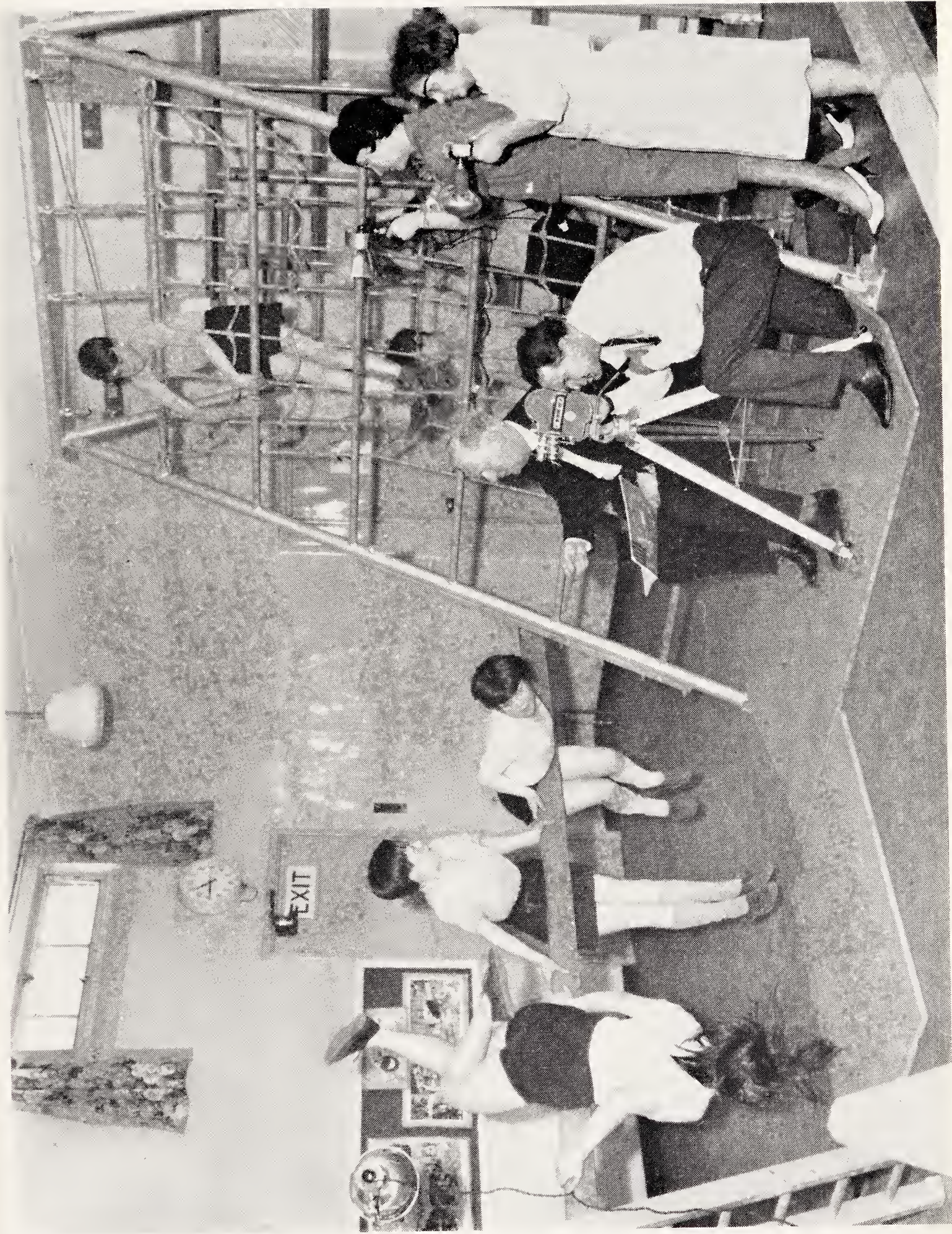
Children born 1964-59	..	..	..	..	..	..	4753
Persons born 1958-48	..	..	..	..	..	..	654
Persons born 1947-43	..	..	..	..	..	..	39
Persons born before 1943		..	..	..	..	..	247
Expectant mothers	..	..	..	..	..	..	7
							<hr/>
Total						..	5700
							<hr/>

AMBULANCE SERVICE

In the year under review, the Ambulance Service has been called upon to deal with a total of 29,944 cases, involving a total mileage of 114,676 miles.

Type of case	Number of cases	Mileage involved
Emergency cases :		
Works accidents	307	110834
Street accidents	721	
Emergency illnesses	1498	
General illness cases :		
Admission to hospitals	3303	
Outpatients—stretcher	3211	
—sitting cases	20291	
Midwives transport	219	1023
Assistance to other authorities	394	2819
Totals ..	29944	114676

The cases dealt with within the Borough averaged 341 per thousand of the population with an average mileage of 4.1 miles per case. The average miles per case for other authorities has been 7.1 per case.



"Another Kind of School," Film in production
(Photograph by courtesy of *Sheffield Telegraph & Star*)

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

HOSPITAL LIAISON

INVESTIGATIONS OF HOME CONDITIONS.

The following table gives details of the work performed by Health Visitors and Home Help Visitors under the arrangements made with the Rotherham and Mexborough Hospital Management Committee for the furnishing of home reports where necessary for inclusion in the patient's hospital record. All discharges from hospital are notified and follow-up visits are paid to the homes of children, old people, and other cases where a request for this has been made:

				Hospital	Number of visits	
					Health Visitors	Home Help Visitors
Visits to hospitals, etc.						
Paediatric clinics and wards	..	..	..	Rotherham Hospital	80	—
				Moorgate General Hospital		
Maternity wards	..	..	..	Moorgate General Hospital	52	—
Geriatric wards	..	..	..	Moorgate General Hospital	—	98
				Badsley Moor Lane Hospital	—	43
				Oakwood Hall Hospital	—	1
				Rotherham Hospital	—	99
				Rosehill Hospital	—	—
General wards	..	..	..	Rotherham Hospital	—	99
				Moorgate General Hospital		98
Chest Clinic	..	..	..		33	—
Investigation of home conditions.						
'A' forms for children admitted to hospital and including special reports requested by Paediatrician or Chest Physician from health visitor attending clinic	..	..	..	Moorgate General Hospital	369	—
				Rotherham Hospital		
				Oakwood Hall Hospital		
'A' forms for aged sick admitted plus any special reports asked for by Physician				Moorgate General Hospital	—	674
				Badsley Moor Lane Hospital	—	21
				Rotherham Hospital	—	558
				Rosehill Hospital	—	—
Aged persons surveys of home conditions for future care	..	..	..	Moorgate General Hospital	—	674
				Badsley Moor Lane Hospital	—	21
				Rotherham Hospital	—	558
'A' Forms, for aged sick and others	..	..	..	Moorgate General Hospital	79	46
				Rotherham Hospital		
				Oakwood Hall Hospital		
Tuberculosis survey visits	..	..	..	Oakwood Hall Hospital	28	—
Enquiries from almoners of Sheffield hospitals re home conditions	..	..	..	Sheffield Royal Hospital	50	20
				Sheffield Royal Infirmary	(all sources)	
				Sheffield National Centre for Radiotherapy		

	Hospital	Number of visits	
		Health Visitors	Home Help Visitors
Reports on social conditions re applications for hospital confinement ..	Moorgate General Hospital Listerdale Maternity Home Hallamshire Maternity Home	661	—
Supervisory visits to patients on discharge from hospital			
‘B’ forms and special requests for children	Moorgate General Hospital Rotherham Hospital Oakwood Hall Hospital		
‘B’ forms and special requests for aged	Moorgate General Hospital Badsley Moor Lane Hospital Rotherham Hospital	— — —	336 — 462
‘B’ forms and special requests for others including tuberculosis	Moorgate General Hospital Rotherham Hospital Oakwood Hall Hospital	53	— — 27
Miscellaneous, including Sheffield Hospitals		—	18

PAEDIATRIC CLINICS.

The number of attendances made by children at these clinics was as follows:

	Moorgate General Hospital	Doncaster Gate Hospital
Children under 5 years	154	175
Children 5 years and over	218	80

The Consultant Paediatrician held four special developmental progress clinic sessions at Child Welfare Centres during the year.

MATERNITY DEPARTMENT, MOORGATE GENERAL HOSPITAL.

Regular visits have been made by health visitors to the Maternity Department of the Moorgate General Hospital:

Number of visits made	52
Number of mothers interviewed	435

CHEST CLINIC.

28 cases of tuberculosis were notified in 1964 and home background reports were submitted to the Chest Physician in each case. Of the 188 persons in contact with tuberculosis all attended the Chest Clinic for examination. Health visitors made 378 visits to tuberculous households during the year. 33 liaison visits were made to the Chest Clinic.

HOME ACCIDENTS.

There was a decrease in the number of home accidents during the year. This figure could be due to good publicity on prevention of accidents or because people dealt with the injury themselves instead of attending hospital for treatment. Many of the injuries sustained could be treated without attendance at hospital. All children under 5 years of age where a home accident occurred were visited and the parents were advised regarding the care and prevention of accidents.

The following table gives a summary of persons who were treated at Doncaster Gate Hospital as a result of home accidents:

	Total number of accidents to persons				Number of accidents causing scalds to persons				Number of accidents causing burns to persons			
	Under 5 yrs.	5-64 yrs.	65 yrs. and over	Total	Under 5 yrs.	5-64 yrs.	65 yrs. and over	Total	Under 5 yrs.	5-64 yrs.	65 yrs. and over	Total
January												
1964	63	387	28	478	3	2	-	5	4	12	1	17
1963	56	447	38	541	3	7	-	10	7	5	-	12
February												
1964	73	406	22	501	3	4	-	7	2	6	-	8
1963	46	405	35	486	3	4	-	7	4	12	1	17
March												
1964	94	421	27	542	4	11	-	15	4	5	-	9
1963	78	453	32	563	1	6	-	7	6	12	1	19
April												
1964	115	512	24	651	7	2	-	9	5	10	-	15
1963	75	485	32	592	1	5	2	8	2	9	1	12
May												
1964	134	603	38	775	9	8	-	17	7	9	-	16
1963	102	555	23	680	5	3	-	8	3	8	-	11
June												
1964	123	573	25	721	7	6	-	13	5	11	1	17
1963	123	579	29	731	4	7	-	11	4	11	-	15
July												
1964	126	587	40	753	3	10	1	14	4	11	-	15
1963	112	553	38	703	3	8	2	13	4	10	-	14
August												
1964	116	544	34	694	3	7	1	11	2	11	-	13
1963	104	516	42	662	1	6	-	7	-	5	1	6
September												
1964	147	561	35	743	2	5	-	7	3	5	1	9
1963	101	540	21	662	6	3	-	9	1	8	-	9
October												
1964	101	488	26	615	2	2	-	4	3	8	-	11
1963	94	509	30	633	6	1	-	7	5	11	-	16
November												
1964	77	480	23	580	3	3	-	6	7	9	-	16
1963	82	442	25	549	2	4	-	6	6	19	-	25
December												
1964	67	428	39	534	4	6	1	11	6	10	-	16
1963	74	423	35	532	3	3	2	8	5	9	-	14
Total												
1964	1236	5990	361	7587	50	66	3	119	52	107	3	162
1963	1047	5907	380	7334	38	57	6	101	47	119	4	170

TUBERCULOSIS

During the year 28 new cases of tuberculosis were notified or came to the notice of the Medical Officer of Health. 188 persons were examined as contacts at the contact clinic. Persons who failed to keep their appointments were re-visited and urged to attend.

In every household where there was a known case of tuberculosis, parents of young children were informed of the benefits of B.C.G. vaccination and 162 children were vaccinated during 1964.

The health visitors paid 378 visits and re-visits to patients during 1964 and made 33 attendances at the Chest Clinic for the purpose of exchanging information regarding cases or contacts of the disease. 33 cases were nursed at home by the Home Nurses, who made 9,941 nursing visits. Details of these cases will be found in the Home Nursing Section of this report.

TUBERCULOSIS CARE COMMITTEE

The work of the Rotherham Tuberculosis Care Committee has continued on the lines indicated in previous reports. The area covered by the Committee is that of the Rotherham Chest Clinic area comprising the County Borough of Rotherham and the surrounding West Riding districts of Maltby and the Rawmarsh Urban District Councils, and the Rotherham and Kiveton Park Rural District Councils.

The scheme of care and after-care is operated through the Rotherham Chest Clinic and all recommendations for assistance are made by the Chest Physician. Secretarial assistance and other sundry expenses are provided by the Rotherham Corporation.

Grants of clothing, bedding and extra nourishment were made to patients. The scheme of Christmas grants to patients on leave from hospital was continued, together with gifts to those necessitous patients receiving treatment at the Chest Clinic or in receipt of assistance from the Committee.

DOMESTIC HELP

1964 shows an increase in the number of cases served, but a decrease in the number of hours assistance given. Yet, in spite of this vast and complex change and interchange of hours and cases, which carries on all through the year, the effectiveness of the allocation has remained fairly constant.

It has been necessary owing to the limits of expenditure to adopt a positive measure of encouragement and the Home Help Organiser, endowed with the spirit of faith and hope, found that the members of the home help section still had enough charity to work as a team just a little harder and more effectively, but it should be noted that however efficient and energetic the administrators of a service may be, they cannot be expected to completely ignore the basic principle that it is the last straw which breaks the camel's back.

The following table gives details of 1,085 homes served by home helps during 1964:

	Brought forward from 1963		New cases		Total cases		Total
	Days	Nights	Days	Nights	Days	Nights	
Maternity	6	—	158	—	164	—	164
Other sickness	26	—	32	1	58	1	59
Old age	550	—	173	6	723	6	729
Tired mothers	—	—	1	—	1	—	1
Sick children	—	—	—	—	—	—	—
Evening Service ..	132	—	—	—	132	—	132
Total ..	714	—	364	7	1,078	7	1,085

An analysis of the hours of service rendered by home helps during 1964 is given in the following table:

	Day (Hours)	Evening (Hours)	Night (Hours)	Total (Hours)
Maternity	13,383	—	—	13,383
Tuberculosis	—	—	—	—
Other sickness	9,886	—	32	9,918
Old age	167,244	14,061	312	181,617
Tired Mothers	61	—	—	61
Sick children	—	—	—	—
Washing Centre ..	5,990	—	—	5,990
Training	867	—	—	867
Total ..	197,431	14,061	344	211,836

EVENING AND NIGHT SERVICE.

There is a steadily growing number of elderly people in need of help in the evenings. This applies particularly to those living alone or with an elderly spouse, who have no relatives or friends able to give them the assistance required to make them safe and comfortable for the night. Therefore, to meet the need, there has been an extension of the service provided and five extra home helps have been allocated.

HOME HELP RECRUITMENT.

No difficulty is experienced in recruiting the right type of woman for this Service. The most successful way is personal recommendation by present home helps employed, who appreciate the need to maintain the high standards already established on this Service.

The number of home helps employed at the end of 1964 was 186.

CARE OF THE AGED.

One of the most urgent problems facing the local authority today is the question of the right type of care for the elderly. The search for the answers to this problem is a subject in which all workers in this field are interested. When one poses this question, one must look for some form of measurement in financial terms and, with the limited evidence available, conclusions must necessarily be of an extremely tentative nature, but in Rotherham it may fairly be said that the application of the Home Help Service in most circumstances seems to be not only much more economical, but more acceptable to the elderly.

It is not easy, as one grows older, to discern the change brought about by the development and improvement of the social services. To them a hostel or hospital, no matter how essential or improved, means leaving their own home and one must not pretend to understand the logic of this, but have a deep understanding and not become ignorant or careless of what, to them, has so many important implications and would be a severe blow to their strong sense of independence.

For example, an old gentleman of 90, ambulant, who suffered so much that if you named it, he had it, was approached and offered hostel accommodation. He listened quite respectfully as the officer explained how comfortable and well cared for he would be. His answer was "If tha likes it so much, thee go thi' sen 'cos I'm not. I wa' born i' this house, I wa' married from it and I intend to dee in it."

There is nothing ambiguous about the immediate consequences of this action, but the ultimate effect of this resisting power narrows down the possibility of manoeuvre later on. It is perhaps typical that those who are most critical have the wisdom to see clearly enough the consequences for their inability to accept what is termed by others as the right type of care.

It is estimated that 98 per cent of the elderly live in their own homes, which is the place they want to be. Old people do not take kindly to being up-rooted. They cling to their independence and possessions. Therefore, one of the main functions of

this service is to supply sufficient help to enable them to continue living in their own homes.

The largest section of the above group consists of persons who are able to lead a normal life, looking after their own affairs, keeping their homes clean with very little help from outside, and this is a section where the service is cut to a bare minimum, to enable help to be given where required in all cases of emergency and illness.

It is of some importance to note that owing to the financial curtailment, which has been brought about in the main by the increase in wages to home helps, the average amount of help given to all cases served in 1964 was $3\frac{3}{4}$ hours per week per case. This reduction in hours would have been quite impossible without the assistance given by the Home Help Washing Centre, plus the increase of visits made by the visiting staff to reassure old people that a withdrawal of home help would be of a temporary nature. The work of the visitor in this section should be recognised as one of the most important and necessary aspects of the Service and plays a prominent role in the efficient administration of the many problems associated with the elderly. Much depends upon her skill, using her own technique in the approach made with a clear picture of the scope of the service she represents.

It may be of interest to know that 218,954 visits were made by visitors and home helps in this section during the year under review.

HOSPITAL LIAISON.

During the year the policy of continual liaison has been pressed forward. This is aimed at reducing to a minimum by continual supervision, discussion and selection the need for hospital admission. This has been achieved progressively and consistently over the year through the availability of the local authority after-care services, i.e. Home Help and Home Nursing Service, plus the introduction of consultations with Dr. A. M. Cantor, the Geriatrician at Moorgate Hospital and the Local Authority Social Worker. This has provided a solid basis for the extraordinary and outstanding success of the scheme.

Three female and four male patients were on the hospital waiting list in December 1964.

The aim of the Local Health Authority is not to rest on its laurels, but to continue to improve the services provided and it is envisaged that a mobile unit of home helps will be provided to give immediate service where considered necessary upon the discharge from hospital of old people who live alone. This unit would be two-fold and play a special role in home and road accidents, and would work in liaison with the Casualty Department at Rotherham Hospital and the Local Authority Ambulance Service. It should be noted, however, that there is already a tremendous amount of work done by the social workers in this field. Every case reported of an old person attending the Casualty Department is visited to ascertain the need and social circumstances. In many instances this procedure has given support and assistance to very frightened old people who just did not know how to cope, particularly those living alone, who have a

fractured wrist or arm, and many other minor accidents. The intention of the mobile unit is to forge a closer link in this part of the chain of hospital liaison to prevent any hardship occurring for old people who have the misfortune to have an accident without anyone at home to give them the necessary care.

It is of interest to note that 683 home visits were made during the year because old people had accidents which necessitated attention at a Casualty Department, and it has been ascertained that the average age of the patient was 80 years. 69 others in this age group were admitted to hospital with fractured femurs and four others died from multiple fractures. The following figures will show there is an increase in the work performed by the social workers and in the number of home helps provided.

	Hospital				Miscel- laneous including Sheffield hospitals
	Doncaster Gate	Moorgate General	Badsley Moor Lane	Oak- wood	
No. of visits to hospital	99	98	43	1	—
No. of interviews in hospital ..	390	490	27	1	—
No. of home visits	558	674	21	46	20
No. of cases for supervision by Social Worker on discharge ..	462	336	—	27	18
No. of Home Helps arranged for patients on discharge	79	54	—	6	7
No. of casualty visits	683	—	—	—	—

Total number of visits for year — 3,994.

Arrangements were made with the co-operation of the General Medical Practitioner for 146 home helps to assist with the after-care of patients discharged from hospital.

OCCUPATIONAL THERAPY SERVICE

The continued success of the Occupational Therapy Service is a tribute to the imagination, foresight, and capacity of the Occupational Therapist in collaboration with other members of the staff in this very demanding work.

One interesting development to be noted is that with the help of Miss Boyd, the Housing Manager, who kindly provided premises, a class was held at Kimberworth Park every Friday afternoon and has been an outstanding success. Workers have been supplied with new materials, and new methods of work have been adopted. From June to December, 150 articles were completed by this class, and entered in competition at the Sale of Work held each year by the Health and Welfare Departments, in liaison with the Old People's Voluntary Welfare Committee.

This work meets a great need, and preliminary discussion has taken place with Alderman W. Beevers, Chairman of the Housing Committee, who has agreed that premises be made available as and when required for further expansion of this service.

The following tables show an increase of 113 on the Register during 1964.

	60-70 (Years)	70-80 (Years)	80-90 (Years)	90 and over (Years)	Total
Females	220	425	117	17	779
Males	-	8	8	-	16
Total	220	433	125	17	795

DOMICILIARY MEALS SERVICE.

It is always a pleasure to report upon the willing co-operation given to this Service by Councillor P. C. Wright, who is always willing to give sympathetic understanding to many problems during the year.

Thanks must also be given to Mr. J. T. Benson, Chief Welfare Officer, for his help in maintaining the grant given by the Local Welfare Authority towards the cost of the Meals Service, which has assisted the Old People's Welfare Committee in co-operation with the Home Help Service to supply 8,025 meals to the aged home-bound during 1964.

WASHING CENTRE.

The Home Help Washing Centre has again proved a sound economical proposition and has helped to maintain the standards of the Home Help Service. It has been necessary to place yet more responsibility upon this part of the Service to enable extra cases to be assisted with fewer hours service by the home helps.

Number of washes 10,997

Number of articles 100,039

MATERNITY.

Lying-in mothers are regarded as first priority, and full-time help has been given.

In order to provide help directly it is required, all expectant mothers who ask for help have been encouraged to book at least two months before the date of confinement to enable the staff of this section to visit, and ascertain the help required.

NURSING EQUIPMENT.

A special chair has been provided on loan for a young mentally subnormal child to ease the burden for the mother, which enables her to go about the house doing her work knowing the child is safe.

Other medical equipment supplied is as follows: —

Articles								Number Loaned
Rubber sheets	..	..	..	..	..	..	..	162
Draw sheets	..	..	..	..	..	..	..	245
Bed pans	..	..	..	..	..	..	..	235
Bottles	..	..	..	..	..	..	..	141
Back rests	..	..	..	..	..	..	..	135
Air rings	..	..	..	..	..	..	..	153
Wheel chairs	..	..	..	..	..	..	..	32
Walking sticks	..	..	..	..	..	..	..	23
Crutches	..	..	..	..	..	..	..	26
Bed tables	..	..	..	..	..	..	..	2
Bed cages	..	..	..	..	..	..	..	55
Mattresses	..	..	..	..	..	..	..	4
Commodes	..	..	..	..	..	..	..	13
Feeding cups	..	..	..	..	..	..	..	20
Sputum mugs	..	..	..	..	..	..	..	5
Tripods	..	..	..	..	..	..	..	10
Ferrules	..	..	..	..	..	..	..	56
Fracture boards	..	..	..	..	..	..	..	12
Bed hoists	..	..	..	..	..	..	..	2
								<hr/>
Total number of articles issued	..	..	..	..	..	..	..	1,331
Total number of articles returned	..	..	..	..	..	..	..	971
								<hr/>
Total number of articles dealt with during the year	..	..	..	..	..	..	..	2,302
								<hr/>

CHIROPODY SERVICE.

The treatments given at the Chiropody Clinics show an increase over 1963, and to meet the demand an additional session has been provided at Greasbrough. It is intended to continue to develop this Service in all parts of the Borough as finance and premises become available.

It is very gratifying to hear the many expressions of thanks for this service, and to experience the comradeship, and indeed hear the humour of these old people. For example, an old gentleman was waiting for chiropody treatment in the waiting room, with his shoes and stockings under his arm, and his trousers rolled up to half mast, and when asked by the receptionist if he was waiting for treatment, he very smartly replied “no lass I’m off for a paddle.”

CHIROPODY

Clinic	Males			Females			Totals		
	Patients		Treatments	Patients		Treatments	Patients		Treatments
	New	Old		New	Old		New	Old	
Redscope	9	33	152	10	107	455	19	140	607
Cranworth	26	104	384	54	253	942	80	357	1,326
Ferham	29	96	391	64	227	909	93	323	1,300
Greasbrough ..	5	30	133	10	56	247	15	86	380
Domiciliary ..	26	67	203	60	181	561	86	248	764
Blind Domiciliary ..	—	3	14	—	16	43	—	19	57
Totals ..							293	1,173	4,434
							1,466		

TRAINING.

IN SERVICE TRAINING SCHEME.

Three courses have been held during the period under review. The course consists of 16 two hourly sessions. Lecture and Housecraft rooms are provided by the Health Committee, with kitchen and laundry facilities. Home helps are paid at the standard hourly rate during the course, and the following are examples of lectures given.

1ST SESSION.

- Introductory talk by the Medical Officer of Health.
- Announcements of Course by the Home Help Organiser.

2ND SESSION—HOUSEHOLD MANAGEMENT.

General routine in cleaning a home, bearing in mind that there is a sick person needing attention.

3RD SESSION—FOOD VALUES.

Invalid cookery, etc.

4TH SESSION—CARE OF INVALIDS.

Importance of serving attractive and suitable foods, warmth and ventilation, etc.

5TH SESSION—METHOD OF COOKING TO PRESERVE FOOD VALUES.

6TH SESSION—QUICK METHOD OF MENDING.

7TH SESSION—PREVENTION OF SPREAD OF INFECTION.

General.

8TH SESSION—PRACTICAL WORK.

Care in infants, bathing, care of bottles and teats, care of napkins.

9TH SESSION—COOKERY.

Including diets and recipes and cookery for one person.

10TH SESSION—DITTO.

11TH SESSION—DEMONSTRATION—AND USE OF DOMESTIC EQUIPMENT IN GENERAL HOUSEWORK.

12TH SESSION—PRACTICAL WORK.

Bedmaking (making a bed from mattress up). Lifting a patient. Care of infected laundry, crockery, etc.

13TH SESSION—FIRE PREVENTION AND ACCIDENTS IN THE HOME WITH SPECIAL REFERENCE TO CHILDREN AND OLD PEOPLE.

14TH SESSION—FIRST-AID IN THE HOME.

Treatment of cuts, bruises, sprains, etc., and also practical work.

15TH SESSION—LECTURE ON NUCLEAR WAR.

i.e. caring for a sick person in an emergency, etc.

16TH SESSION—THE DOMESTIC HELP SERVICE IN RELATION TO THE MENTALLY ILL WITH PARTICULAR EMPHASIS ON THE AGED.

Group discussions are held regularly throughout the course.

The training given not only enables a home help to understand the extension of her duties, but assists in conserving her energy and makes her realise that she is an important member of a large social service bearing responsibility for the patient, the local health authority, and often creates a new set of values with herself.

CENTRAL REGISTER FOR THE AGED.

A central register for the aged has been in operation since 1956.

Its compilation has an importance not only by assisting the Home Help Service, but many other sections of the local authority. It indicates changing circumstances and measures the extent of planning for the future.

The importance of the assistance given by the Chairman, Councillor P. C. Wright, and visitors of the Old People's Welfare Committee to maintain this register is invaluable.

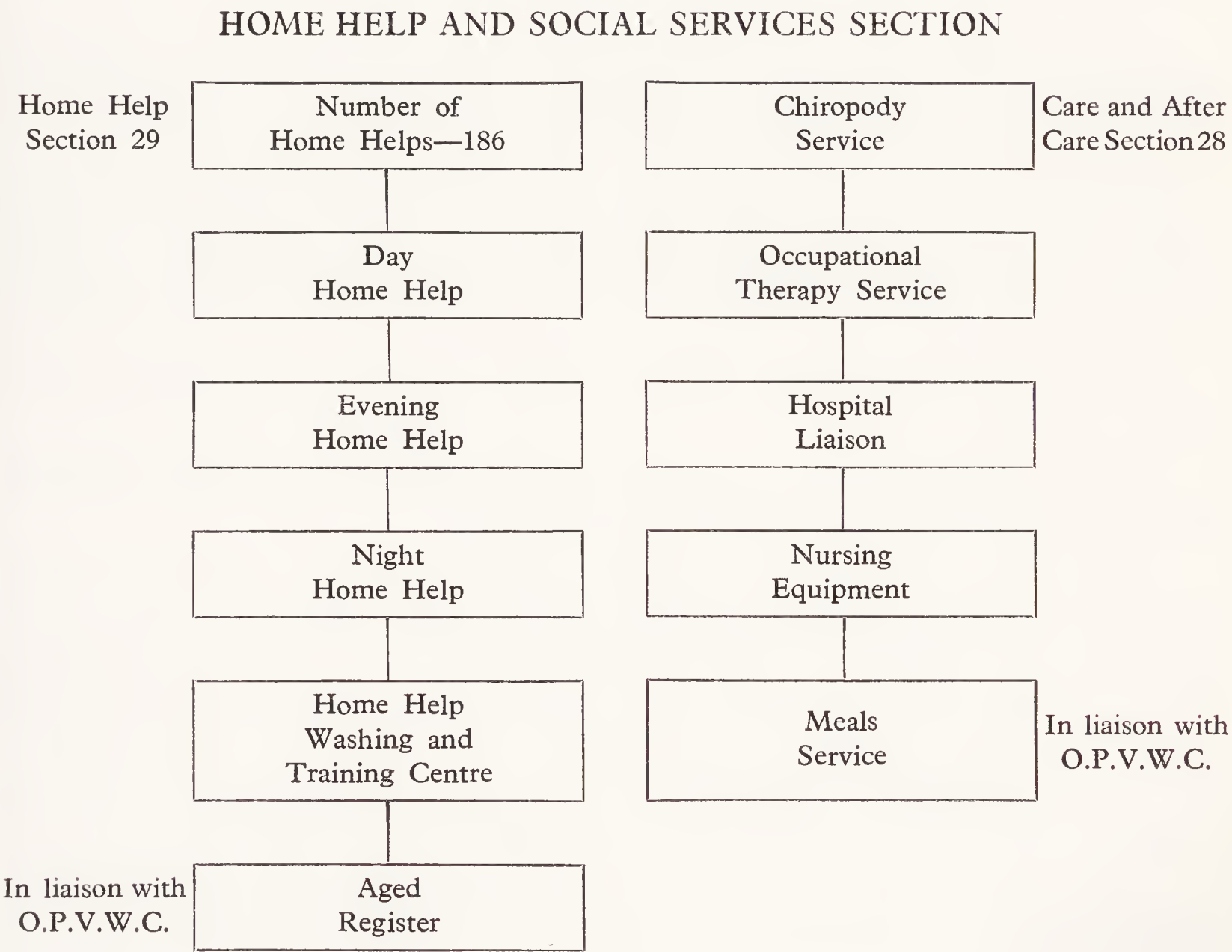
LIAISON.

Emphasis must again be placed upon the excellent co-operation with the Home Nursing Service. As previously reported, all calls for day or night help made by the Home Nursing Superintendent are given immediate attention and, in return, assistance and advice is readily given.

The liaison which exists between the General Medical Practitioner has continued, and many discussions have taken place with him and the Home Help Organiser and Geriatric Social Worker to provide a home help, or give general advice regarding the social care of the patient.

A close liaison exists with the Welfare Department, and this is essential because the services are complementary having the same object in view, namely, the care of the patient.

The Home Help Service will continue to grow, and it is of great importance that work in this field should be linked successfully with other Social Services whether statutory or voluntary.



The above gives a picture of the number of services covered in this busy section of the Health Department.

MENTAL HEALTH

The building of a new clinic in the grounds of Ferham House necessitated the removal of the Mental Health Service offices to accommodation at "Highfield," Doncaster Road. The offices are within easy access of the town centre and the move has not presented any difficulties to members of the public who receive the service.

Miss E. Kelford, Supervisor of the Training Centres, retired at the end of the year and Mrs. V. Redfern, Assistant Supervisor, was appointed to the post of Supervisor of the Junior Training Centre.

TRAINING COURSES (JUNIOR AND ADULT TRAINING CENTRE STAFF).

The two female Assistant Supervisors who were seconded to the 1963-64 Training Course organised by the National Association for Mental Health, successfully completed the course and were awarded the Association's Diploma.

In September a male member of the Adult Training Centre staff commenced the Association's 1964/65 Course held at Birmingham. No doubt the policy of sending staff on training courses will continue until the whole of the staff at both the Junior and Adult Training Centres are trained.

JUNIOR TRAINING CENTRE.

Mid-way through the year the centres were physically separated, a move precipitated by the continued over-crowding at the Junior Centre.

The adults were moved to temporary premises and the Adult Centre with its greater floor space given over entirely to the Juniors. Apart from creating more places, the move permitted a more ambitious programme of training for the juniors. Many new and modern training aids have been introduced and one which immediately catches the eye is the physical training apparatus which consists of horizontal ladders, parallel and horizontal bars, play frame, and balancing bench. A site has been allocated for a new Adult Centre and it is hoped that building will commence during 1965.

At the end of the year 23 boys and 17 girls whose ages range from four years to fifteen years were in attendance at this centre. The number on the register shows an increase of six as compared with last year and a fourth class has now been created.

The graded series of play activities and the teaching of reading, using the method devised by Dr. C. Gattegno, has met with success and improvement is apparent in a number of the pupils.

With the co-operation of the Baths Committee and the Baths Superintendent a swimming session was allocated for suitable pupils attending the Junior Training

Centre. A group of six to eight including four mongol children attend the baths for a half hour session every Thursday morning. Maximum supervision is undertaken by members of the Mental Health Service and Baths staff. Progress in this new venture, although slow, is most encouraging. There is no lack of enthusiasm on the part of the participants and there is no evidence of fear. It is a pleasure to see the children enjoy the same facilities as those afforded to ordinary school children.

Attendances for the year totalled 12,416 half days out of a possible 14,544 giving a percentage attendance of 85.36.

ADULT TRAINING CENTRE.

Twenty-three males and 24 females were in attendance at this centre at the close of the year.

In addition to the contract work of carding combs an additional work contract was obtained during the year. The new work consists of assembling nursing packs of various sizes. These dressing packs are extremely simple in composition and the assembly is easily broken down into suitable components and a production line of simple repetitive jobs has been formed. When completed the packs are sent to the Local Authority's Sterilization Department prior to being distributed to the Home Nursing Service and a local hospital. Under supervision this work is carried out most satisfactorily.

Details of the contract work completed for this year are as follows: —

(1) Pre-packed dressings

(a)	Home Nursing Service	Packed
	Large packs	5,112
	Small packs	4,210
(b)	Rotherham Hospital	
	Large packs	4,080
	Small packs	3,264

Combs carded

(2) Combs	410,400
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Attendances for the year numbered 17,512 half days out of a possible 19,280 giving a percentage attendance of 90.8.

OPEN DAY—JUNIOR AND ADULT TRAINING CENTRES.

Although now physically separated the centres held their Open Day on Thursday, 19th November, 1964.

The Centres remained open throughout normal centre hours and the attendance at both was very good.

The display of handicrafts was somewhat reduced this year due to the amount of contract work now undertaken at the Adult Centre and the new pattern of training at the Junior Centre. Proceeds of the sale of articles made during the year amounted to £171. 8s. 2d. Included in this amount was work done for the Health Department to the value of £15. 12s. 3d.

PARENT TEACHER ASSOCIATION.

The Association continues to function satisfactorily and regular social evenings are held during the winter months. At the Annual General Meeting held in June all the teachers were elected to the committee. This move was welcomed by the parents and representation on the committee is now equal.

MENTAL HEALTH HOSTEL (Park Lea, Doncaster Road)

The Mental Health Hostel built to accommodate ten male and ten female residents was officially opened on 5th November, 1964 by His Worship the Mayor, Councillor A. Wilde, M.R.S.H. It is hoped that the hostel will function as a transitional service with a strong emphasis on rehabilitation and a return to normal living, for the classes of patients recovering from mental disorder and considered suitable for hostel life. This implies both careful case selection and the need for the fullest collaboration between the Local Health Authority and the mental hospital, so that the hostel as a rehabilitation service becomes a true joint enterprise.

Of the eight patients (four male and four female) admitted up to the end of the year one male was successfully found employment and accommodation after a stay of seven weeks. Five of the remaining residents are in employment and two are making good progress and will shortly be able to return to their own homes.

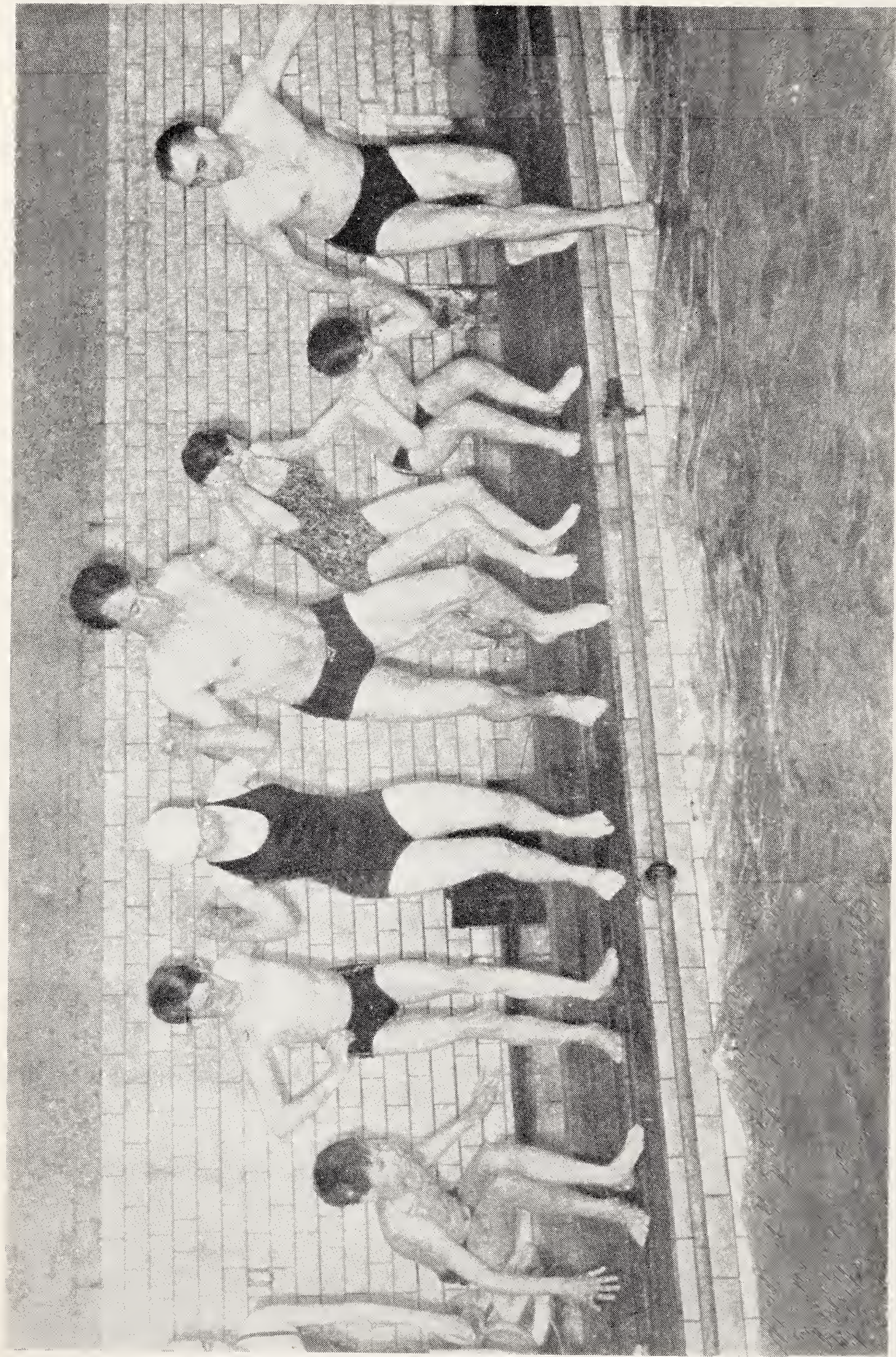
SHORT TERM CARE (Ministry of Health Circular 5/52).

Cases were admitted into hospital for periods of short term care. Details are as follows: —

	Male	Female	Total
Thundercliffe Grange Hospital, Rotherham	7	2	9
Dronfield Hospital, Dronfield	4	—	4
St. Catherine's Hospital, Doncaster	3	—	3
Aston Hall Hospital, Derby	1	—	1
Grenoside Hospital, Sheffield	2	—	2
Total 1964 ..	17	2	19
Total 1963 ..	20	6	26



Park Lea Mental Health Hostel



Junior Training Centre children at weekly swimming session

COMMUNITY CARE OF THE SUB-NORMAL AND SEVERELY SUB-NORMAL CASES

The following statistics relate to the number of sub-normal and severely sub-normal cases who were receiving community care as at 31st December, 1964.

	Under 16 years		Over 16 years		Total
	Male	Female	Male	Female	
Severely sub-normal under guardianship ..	—	—	—	2	2
Severely sub-normal and sub-normal under community care	27	18	75	87	207
Totals for 1964 ..	27	18	75	89	209
Totals for 1963 ..	28	14	69	88	199

With the exception of the two cases under guardianship (supervised by the Brighton Guardianship Society) the community care of the above cases was carried out by officers of the Mental Health Service. The number of routine visits made in connection with this type of patient totalled 1,021 compared with 1,109 for the year 1963. In addition to the routine visits made, numerous visits were made to various agencies on behalf of or in the interests of these cases.

WAITING LIST—SUB-NORMAL AND SEVERELY SUB-NORMAL PATIENTS.

A survey of cases awaiting admission into hospital as at 31st December, 1964, shows that 27 cases were awaiting admission. Details are as follows:

	URGENT				NON-URGENT				Total
	Under 16		Over 16		Under 16		Over 16		
	Male	Female	Male	Female	Male	Female	Male	Female	
Cot and Chair cases ...	—	3	—	—	—	1	2	—	6
Low Grade (ambulant) ...	3	4	—	2	—	—	9	3	21
High Grade (ambulant) ...	—	—	—	—	—	—	—	—	—
Total for 1964 ...	3	7	—	2	—	1	11	3	27
Total for 1963 ...	5	2	3	2	—	1	11	2	26

The difficulty in obtaining hospital accommodation for cases on the urgent waiting list continues. At the close of the year there were twelve such cases. Six of these cases can be considered extremely urgent, two having been on the waiting list since 1957. From information received it would appear that there is little hope of accommodation being made available for quite some time.

In the meantime the parents, and in particular the mother, must continue to bear the strain which is made a little easier by the excellent co-operation given by the Sheffield Regional Hospital Board who arrange periods of short term care for these cases as frequently as possible.

GUARDIANSHIP CASES.

Two cases, both severely sub-normal females under the guardianship of this authority and resident in the south of England, continue to be supervised by the Brighton Guardianship Society on behalf of the Rotherham Health Authority. This is one case less than last year, one female having been made the subject of a transfer order from guardianship to hospital care.

REFERRED FOR CARE (SUB-NORMAL AND SEVERELY SUB-NORMAL CASES).

The following cases were referred for care during 1964:

	Male	Female	Total
(1) Referred by Local Education Authority under the provisions of Sec. 57(4), Education Act, 1944	3	7	10
(2) Referred informally under the provisions of Section 28, National Health Service Act, 1946	7	11	18
Total 1964 ..	10	18	28
Total 1963 ..	12	8	20

As in previous years the majority of cases referred for care were notified by the Local Education Authority.

MENTAL HEALTH ACT, 1959 (SUB-NORMAL AND SEVERELY SUB-NORMAL SECTION).

The following table gives details of sub-normal and severely sub-normal patients who were in hospital as at 31st December, 1964:

	Male	Female	Total
St. Catherine's Hospital, Doncaster	26	28	54
Grenoside Hospital, Sheffield	8	3	11
Whittington Hall Hospital, Chesterfield	—	5	5
Stoke Park Hospital, Bristol	2	1	3
Thundercliffe Grange Hospital, R'ham.	4	4	8
Rampton Hospital, Retford	3	—	3
St. Joseph's Home, Sheffield	—	2	2
Fir Vale Hospital, Sheffield	—	2	2

		Male	Female	Total
Aughton Court Hospital, Sheffield ..	..	—	3	3
Borocourt Hospital, Reading ..	..	1	—	1
Victoria Hospital, Mansfield ..	..	1	—	1
The Manor Hospital, Epsom ..	..	1	—	1
Dronfield Hospital, Dronfield ..	..	1	1	2
Glenfrith Hospital, Leicester ..	..	1	—	1
Ridgeway Hospital, Derbyshire ..	..	1	—	1
Balderton Hospital, Newark ..	..	1	—	1
Hollowmeadows Hospital, Sheffield ..	..	1	—	1
Middlewood Hospital, Sheffield ..	..	1	—	1
		—	—	—
Total ... ..	...	52	49	101
		—	—	—

The total number of cases in hospitals shows no change from the previous year. During the year four males and three females were admitted and two males and five females were discharged.

Twenty-seven cases granted holiday leave were escorted from and to hospitals by officers of the Mental Health Service.

MENTAL HEALTH ACT, 1959.

(1) HOSPITAL ADMISSIONS.

The following table gives details of cases referred to the Mental Welfare Officers and the resultant action taken with comparable figures for the previous year.

Disposal of cases referred :			1964	1963
Admitted to hospital, Section 5, Mental Health Act, 1959 ..	..	..	52	49
Admitted to hospital, Section 29, Mental Health Act, 1959 ..	..	..	44	86
Admitted to hospital, Section 25, Mental Health Act, 1959 ..	..	..	14	5
Admitted to hospital, Section 26, Mental Health Act, 1959 ..	..	..	—	2
Admitted to hospital, Section 60, Mental Health Act, 1959 ..	..	..	1	4
Hospital admission not necessary .. .. .	..	..	15	26
			—	—
			126	172
			—	—

The total number of hospital admissions shows a decrease of 35 over the previous year.

Mental Welfare Officers were called upon on 18 occasions outside normal office hours.

(2) AFTER CARE (SECTION 28, NATIONAL HEALTH SERVICE ACT, 1946/SECTION 6, MENTAL HEALTH ACT, 1959).

At the commencement of the year 175 cases were receiving after-care following discharges from psychiatric hospitals.

The number of cases referred during the year totalled 95, a decrease of 8 over the previous year.

The total number of cases under this heading receiving after care is now 135. Visits made during 1964 show a decrease from the previous year. During 1963, 1,725 visits were made as compared with 1,484 for this year.

The amount of time taken up by visiting psychiatric clinics (four), Middlewood Hospital (once per week), interviewing patients pending discharge, and the Mental Health Hostel in connection with the needs of the residents, is responsible for the decrease in the number of visits made in connection with after care.

(3) LOCAL AUTHORITY—PREVENTIVE AND AFTER CARE CLINICS.

The importance of this clinic has been emphasised in previous annual reports. The number of patients seen at the clinic continues to rise. During the year 42 sessions were held and 297 patients seen, an increase of 81 as compared with last year.

The clinic, as always, operates smoothly and efficiently and this is by and large due to the excellent co-operation between the officers of the Mental Health Service and Dr. R. J. Kerry, the Consultant Psychiatrist.

WELFARE

In accordance with Circular 1/54 of the Ministry of Health dealing with the subjects for inclusion in the Annual Reports of Medical Officers of Health the following items are included :

NATIONAL ASSISTANCE ACTS 1948 AND 1951

The Welfare Committee is responsible for the carrying out of the Council's Schemes under the above Act.

A joint sub-committee dealing with the Care of the Aged was formed in March, 1951, with three members each from the Health and the Welfare Committees of the Council. These are the Committee's Chairmen and Vice-Chairmen and one other member from each committee.

BLIND PERSONS

The number of blind persons registered in the Borough at the 31st December, 1964, was 214. There was a decrease of 15 from the previous year, and the following table gives details of the age and sex of the cases remaining on the register :

Age groups	Males	Females	Total
Under 5 years	—	—	—
Over 5 years and under 16 years	4	2	6
Over 16 years and under 20 years	—	—	—
Over 20 years and under 30 years	1	5	6
Over 30 years and under 40 years	3	1	4
Over 40 years and under 50 years	6	8	14
Over 50 years and under 60 years	15	7	22
Over 60 years and under 70 years	15	27	42
Over 70 years	46	74	120
Totals	90	124	214

Details of the employability of the cases over 16 years are as follows :

	Males	Females	Total
Employed	12	1	13
Trained, but unemployed	1	—	1
Training	—	—	—
Trainable	—	—	—
Unemployable	73	121	194
Totals	86	122	208

The following table gives details of the occupation of the persons employed, or trained but unemployed:

Occupation	Employed		Trained, but unemployed	
	Males	Females	Males	Females
Basket Maker	1	—	—	—
Braille copyist	2	—	—	—
Brush Maker	4	—	—	—
Knitter	—	1	—	—
Mat Maker	1	—	—	—
Physiotherapist	1	—	—	—
Piano Tuner	—	—	1	—
Poultry Keeper	1	—	—	—
Telephonist	1	—	—	—
Working Proprietor	1	—	—	—
Totals	12	1	1	—

In 1964 each new case was examined by the Consultant Ophthalmologists, Miss M. A. C. Jones or Mr. T. S. Maw, and Form B.D.8 completed. 41 reports on this form were received during 1964: 12 were in respect of persons certified blind ; 12 were partially-sighted ; six were re-examined, of these two were transferred from the partially-sighted to the blind register, three remained on the partially-sighted register, one of these to be re-examined in a year's time, one in 18 months, and the other in two years, and one case was de-certified ; 11 cases were found to be not blind.

A study of these reports shows the following conditions obtained:

Condition	Blind	Partially sighted	Re-examined	Not blind
Acute Glaucoma	—	1	—	—
Cataract	2	4	1	5
Cataract and Central Choroido-retinal Degeneration	—	—	1	—
Cataract and Glaucoma	1	—	—	—
Central Retinal Vein Thrombosis	—	—	—	1
Choroidal Sclerosis	1	—	—	—
Choroido-Retinal Atrophy	—	—	1	—
Cirante Retinopathy	1	—	—	—
Corneal Dystrophy	—	1	—	—
Disciform Degeneration	—	—	1	—
High Myopia and Optic Atrophy	—	—	—	1
Hypertension	—	—	—	1
Kerato-Conjunctivitis Sicca	—	1	—	—
Interstitial Keratitis	—	1	—	—

Condition	Blind	Partially sighted	Re-examined	Not blind
Lamellan Cataract	1	—	—	—
Macular Degeneration	—	2	1	—
Myopia	—	—	—	1
Myopic Degeneration	1	—	—	—
Optic Atrophy	1	1	—	—
Retinal Detachment	—	1	—	—
Retinal Vascular Accident and Glaucoma	—	—	—	1
Retinitis Proliferans	1	—	—	—
Retino-Blastoma	—	—	—	1
Retinopathy	1	—	1	—
Retinopathy and Concomitant Convergent Squint and Cataract	1	—	—	—
Gross Concussion, injuries to both eyes (No Definite Classification)	1	—	—	—
Totals	12	12	6	11

The following observations are made in amplification of the above table:

ACUTE GLAUCOMA.

One case examined and found to be partially-sighted—ophthalmic medical supervision recommended.

CATARACT.

Two cases registered blind, both recommended to have surgical treatment, one at early convenience, one if and when general condition permits.

Four cases examined and found to be partially-sighted, two requiring surgical treatment at early convenience, one medical treatment, and one ophthalmic medical supervision.

One case was re-examined and de-certified.

Five cases were examined and found to be not blind, two requiring ophthalmic medical supervision and for the other three no treatment was recommended.

CATARACT AND CENTRAL CHOROIDO-RETINAL DEGENERATION.

One case re-examined and registered blind—no treatment recommended.

CATARACT AND GLAUCOMA.

One case examined and registered blind—no treatment recommended.

CENTRAL RETINAL VEIN THROMBOSIS.

One case examined and found to be not blind—optical treatment recommended.

CHOROIDAL SCLEROSIS.

One case examined and registered blind—no treatment recommended.

CHOROIDO-RETINAL ATROPHY.

One case re-examined and remained on the partially-sighted register—no treatment recommended.

CIRANTE RETINOPATHY.

One case examined and registered blind—no treatment recommended.

CORNEAL DISTROPHY.

One case examined and found to be partially-sighted—ophthalmic medical supervision recommended.

DISCIFORM DEGENERATION.

One case re-examined and registered blind—no treatment recommended.

HIGH MYOPIA AND OPTIC ATROPHY.

One case examined and found to be not blind—ophthalmic medical supervision recommended.

HYPERTENSION.

One case examined and found to be not blind—no treatment recommended.

KERATO-CONJUNCTIVITIS SICCA.

One case examined and found to be partially-sighted—ophthalmic medical supervision recommended.

INTERSTITIAL KERATITIS.

One case examined and found to be partially-sighted—no treatment recommended.

LAMELLAN CATARACT.

One case examined and registered blind—medical treatment recommended.

MACULAR DEGENERATION.

Two cases were examined and found to be partially-sighted—ophthalmic medical supervision recommended.

One case was re-examined and remained on the partially-sighted register—medical treatment recommended.

MYOPIA.

One case examined and found to be not blind—ophthalmic medical supervision recommended.

MYOPIC DEGENERATION.

One case examined and registered blind—ophthalmic medical supervision recommended.

OPTIC ATROPHY.

Two cases examined, one of these was registered blind and was recommended to have medical treatment, the other was found to be partially-sighted and ophthalmic medical supervision was recommended.

RETINAL DETACHMENT.

One case examined and found to be partially-sighted—ophthalmic medical supervision recommended.

RETINAL VASCULAR ACCIDENT AND GLAUCOMA.

One case examined and found to be not blind—ophthalmic medical supervision recommended.

RETINITIS PROLIFERANS.

One case examined and registered blind—ophthalmic medical supervision recommended.

RETINO-BLASTOMA.

One case examined and found to be not blind—ophthalmic medical supervision recommended.

RETINOPATHY.

One case examined and registered blind—medical treatment recommended.

One case re-examined and remained on the partially-sighted register—medical treatment recommended.

RETINOPATHY AND CONCOMITANT CONVERGENT SQUINT AND CATARACT.

One case examined and registered blind—medical treatment recommended.

GROSS CONCUSSION, INJURIES TO BOTH EYES (No Definite Classification).

One case examined and registered blind—no treatment recommended.

EPILEPTICS AND SPASTICS

The following cases of epilepsy are known to the Welfare Department :

INSTITUTIONAL		Males	Females	Total
“Rotherstoke”				
(Part III Accommodation)	..	2	—	2
“Rookwood”				
(Part III Accommodation)	..	1	—	1
David Lewis Colony, Manchester	..	—	2	2
AT HOME :				
On Handicapped Persons Register	..	21	15	36
		—	—	—
		24	17	41
		—	—	—

Fourteen cases of Cerebral Palsy are also known to that Department, and details of these are as follows :

INSTITUTIONAL :		Males	Females	Total
“Kirk House”, Rotherham				
(Part III Accommodation)				
Huddersfield C.B. case	.. ..	—	1	1
The Bedford Home, Buxton	..	—	1	1
AT HOME :				
On Handicapped Persons Register		5	7	12
		—	—	—
		5	9	14
		—	—	—

COUNTY BOROUGH OF ROTHERHAM
(EDUCATION COMMITTEE)



REPORT
OF THE
PRINCIPAL
SCHOOL MEDICAL
OFFICER
FOR THE YEAR
1964

COUNTY BOROUGH OF ROTHERHAM.

GENERAL STATISTICS.

Population—Registrar-General's estimate as at mid-year 1964	...	...	...	...	...	...	...	...	86,510
School population—	...	...	...	...	...	...	...	...	15,016
Area (acres)	...	...	...	...	...	...	...	...	9,255
Nursery Schools :									
Number of schools	...	...	...	...	...	...	...	...	1
Number of departments	...	...	...	...	...	...	...	...	1
Total number on roll	...	...	...	...	...	...	...	...	101
Primary Schools :									
Number of schools	...	...	...	...	...	...	...	...	18
Number of departments	...	...	...	...	...	...	...	...	29
Total number on roll	...	...	...	...	...	...	...	...	8,246
General Secondary Schools :									
Number of schools	...	...	...	...	...	...	...	...	6
Number of departments	...	...	...	...	...	...	...	...	8
Total number on roll	...	...	...	...	...	...	...	...	4,319
Voluntary Primary Schools :									
Number of schools	...	...	...	...	...	...	...	...	2
Number of departments	...	...	...	...	...	...	...	...	2
Total number on roll	...	...	...	...	...	...	...	...	594
Voluntary Secondary Schools :									
Number of schools	...	...	...	...	...	...	...	...	1
Number of departments	...	...	...	...	...	...	...	...	1
Total number on roll	...	...	...	...	...	...	...	...	429
Secondary Grammar Schools :									
High School for Girls—Number of pupils	...	...	...	...	...	...	...	...	559
Grammar School for Boys—Number of pupils	...	...	...	...	...	...	...	...	537
Special Schools :									
Newman School—Number of pupils	...	...	...	...	...	...	...	...	134
Abbey School (Educationally sub-normal children)—									
Number of pupils	...	...	...	...	...	...	...	...	97

SCHOOL CHILD POPULATION ACCORDING TO AGE

Age					Boys	Girls	Total
3 years	..	..	..	..	65	56	121
4 years	..	..	..	..	469	461	930
5 years	..	..	..	..	701	703	1404
6 years	..	..	..	..	720	686	1406
7 years	..	..	..	..	671	638	1309
8 years	..	..	..	..	637	671	1308
9 years	..	..	..	..	644	621	1265
10 years	..	..	..	..	669	627	1296
11 years	..	..	..	..	657	645	1302
12 years	..	..	..	..	634	600	1234
13 years	..	..	..	..	676	647	1323
14 years	..	..	..	..	660	708	1368
15 years	208	195	403
16 years	89	92	181
17 years	80	74	154
18 years	6	6	12
Totals ..					7586	7430	15016

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CLINIC ATTENDANCES

The following table summarises the work done at the several school clinics during the year :—

Work undertaken	Ferham House		Cranworth Road		Thorpe Hesley		Greasbrough		Newman School		Blackburn		Abbey School		High Greave Road		St. John's Green		Totals					
	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	School cases		Non-School cases		All cases	
																			Cases	Attendances	Cases	Attendances		Cases	Attendances
Minor ailment and general	538	838	1340	1964	202	229	27	37	205	2980	60	98	39	44	914	978	140	190	3438	7279	27	79	3465	7358
Ophthalmic	458	1211	383	868	—	—	—	—	—	—	—	—	—	—	—	—	—	—	764	1937	77	142	841	2079
Ear, nose and throat	335	1521	401	1341	—	—	—	—	—	—	—	—	—	—	—	—	—	—	593	2513	143	349	736	2862
Dental ..	2863	9149	2333	7297	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4650	15260	546	1186	5196	16446
Child guidance	415	589	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	219	343	196	246	415	589
Chiropody	218	463	188	398	—	—	—	—	—	—	—	—	—	—	—	—	—	—	402	857	4	4	406	861
Speech therapy	116	826	5	28	—	—	—	—	11	109	—	—	13	104	—	—	—	—	133	948	12	119	145	1067
Employment	43	43	22	22	—	—	—	—	—	—	—	—	—	—	—	—	—	—	65	65	—	—	65	65
Physiotherapy	68	856	69	1107	—	—	—	—	49	1879	—	—	—	—	—	—	—	—	176	3359	10	483	186	3842
Total	5054	15496	4741	13025	202	229	27	37	265	4968	60	98	52	148	914	978	140	190	10440	32561	1015	2608	11455	35169

MEDICAL INSPECTION AND TREATMENT

For the purposes of school medical inspection, each school medical officer is responsible for most of the schools within an appropriate section of the Borough. In this way a more personal liaison is established with the teaching staff. The medical officer's duties at the child welfare clinics of the same locality also ensures both a greater background knowledge of the families consulting him and more continuity of child care.

During 1964 routine medical examinations were carried out in respect of 3,380 children compared with 4,576 children in 1963.

Special and re-inspections totalled 17,446 against 21,433 in 1963.

These figures include children in the children's homes and boarded-out children.

SCHOOL LEAVERS

A precis of school medical history is sent, with the co-operation of the Health Executive Council, to the family doctors in respect of each child about to leave school. During 1964 a total of 1,475 such reports were issued.

PHYSICAL CONDITION

The following table shows the classifications of children at the routine examinations.

No. of children examined		Satisfactory	Unsatisfactory
1964	3,380	99.97	0.03
1963	4,576	99.96	0.04

HEIGHTS AND WEIGHTS

Random test samples of 50 children inspected at the larger schools and the actual number (if under 50 children inspected) at the other schools, revealed the following average heights and weights. Comparative figures are given in brackets for 1963.

Groups	Number of children	Average height in.	Average weight lb.
Entrants	Boys 441 (524)	43.91 (43.24)	43.46 (42.23)
	Girls 466 (464)	43.47 (42.94)	43.13 (42.14)
Intermediates .. Age 9	Boys 365 (462)	52.69 (52.42)	67.19 (66.51)
	Girls 374 (447)	52.70 (52.30)	67.04 (60.04)
Leavers	Boys 100 (348)	64.30 (63.83)	116.48 (114.84)
	Girls 108 (348)	62.84 (61.99)	113.57 (113.80)

INFESTATION

The number of children found with lice and/or nits during the year was 2,895 compared with 879 in 1963.

These totals are considerably higher than those for the last few years. Because it was realised that the level of infestation was increasing in certain schools, a new method of approach was adopted. Two members of the nursing staff simultaneously examined each child under a good light and all children whose hair contained nits or lice were excluded, however mild the infestation. All schools were surveyed by this method and no child returned to school until declared clear at an inspection in the school clinic.

It is already possible to identify the families whose children constitute the main reservoirs of infection, and these families are to receive closer scrutiny. However, the rapidity with which infestation is transmitted makes it still necessary to survey certain schools at frequent intervals—as often as once a term when possible.

The measures used in this campaign have induced hostility and bitterness amongst some of the parents whose children have been excluded for a minor degree of infection. This is a pity because the children we are particularly trying to protect are those who, through no fault of their own parents, suffer infection by associating with children from heavily infected families.

OPHTHALMIC SERVICE

Visual acuity tests are carried out routinely in schools at ages 5, 7, 9, 11 and 14.

The following table analyses the results of routine vision testing in 1964 :

Ages					Number routinely tested	Number requiring treatment	Percentage
5	..	..	..	..	1197	82	6·8
7	..	..	..	..	1374	173	12·6
9	..	..	..	..	933	171	18·3
11	..	..	..	..	1013	173	17·1
14	..	..	..	..	823	151	18·3
Totals ..					5340	750	12·8

Special eye clinics were attended by an ophthalmic surgeon on 89 occasions. The appended tables give an analysis of the work:

		Refractions			Re- inspections
		Inspected	Refracted	Spectacles prescribed	
School children	.. ..	764	676	562	496
Pre-school children	.. ..	77	58	32	8
Totals ..		841	734	594	504

The conditions found at the examinations were as follows:

						School children	Pre-school children
Emmetropia	..	..	..	..	..	58	2
Hypermetropia	..	..	..	..	..	51	7
Hypermetropic astigmatism	..	..	..	..	..	261	21
Myopia	..	..	..	..	..	124	4
Myopic astigmatism	..	..	..	..	..	63	—
Mixed astigmatism	..	..	..	..	..	65	—
Concomitant strabismus	..	..	..	..	..	44	37
Nystagmus	..	..	..	..	..	4	—
Amblyopia	..	..	..	..	..	15	—
Cataract	..	..	..	..	..	2	1
Epicanthus	..	..	..	..	..	—	6

EAR, NOSE AND THROAT SERVICE

Children are referred to the Ear, Nose and Throat Consultant from both general practitioners and school medical officers. Approximately 45 per cent of all new cases referred were children in whom a hearing loss had been detected in school.

The work of the clinic is summarised in the following tables:

	Ferham House		Cranworth Road		Total	
	School children	Children under 5	School children	Children under 5	School children	Children under 5
Number of new cases referred to						
Ear, Nose and Throat Consultant	204	68	179	38	383	106
Total number of cases attending ..	260	75	333	68	593	143
Total number of attendances made	1313	208	1200	141	2513	349

Particulars of the conditions found are given in the following table:

	Ferham House		Cranworth Road		Total	
	School children	Children under 5	School children	Children under 5	School children	Children under 5
Number of cases attending ..	260	75	333	68	593	143
Ear conditions—Suppurative ..	60	22	92	13	152	35
Non-suppurative	108	15	161	26	269	41
Nose conditions	35	9	36	7	71	16
Throat conditions	57	29	44	22	101	51

Suitably trained nurses sweep test the hearing of all school children at the ages of 5, 7, and 11 years, using portable transistorised pure tone audiometers. Those children failing this test at 25 d.b.s. are retested in school and referred to the Ear, Nose and Throat Consultant if failing a second time.

Results of routine hearing tests:

Age	Number tested	Failed 1st test	Failed 2nd test
5 years	1039	154	38
8 years	1389	151	23
11 years	833	78	17
Totals ..	3261	383	78

The total number of children with a hearing loss referred from routine medical inspection and special audiometric surveys at 5, 7 and 11 years was 247.

The Ear, Nose and Throat Consultant's findings of these children are as follows:

	Ferham House		Cranworth Road		Total	
	School	Children	School	Children	School	Children
	children	under 5	children	under 5	children	under 5
Findings:						
Chronic suppurative otitis media	3	—	5	—	8	—
Acute suppurative otitis media ..	7	—	8	—	15	—
Mild eustachian catarrh	3	—	2	—	5	—
Allergic rhinitis	4	1	10	3	14	4
Wax	24	—	29	—	53	—
Foreign bodies	2	—	3	—	5	—
No defects	23	—	11	—	34	—
Recommendations:						
Removal of tonsils and adenoids	16	4	11	3	27	7
Removal of adenoids	11	1	10	1	21	2
Removal of tonsils	9	—	8	—	17	—
Myringotomy and suction clearance	15	2	14	1	29	3
Antrum washout	5	—	3	—	8	—
Hearing aids	2	—	—	1	2	1
Removal aural polypus	1	—	1	—	2	—

ORTHOPAEDIC SERVICE

ORTHOPAEDIC CONSULTATIONS.

Twenty-three sessions were held by the Orthopaedic Consultant during the year.

Details are given below:

					First	Total
					inspections	inspections
School children .. ..	..	..	..	..	105	233
Pre-school children .. ..	..	..	..	..	27	51
					<hr/>	<hr/>
				Total	132	284
					<hr/>	<hr/>

PHYSIOTHERAPY SERVICE

REPORT OF THE PHYSIOTHERAPIST.

During the year 3,359 treatments were given to school children and 483 treatments to children under the age of five.

There has been a considerable increase in the number of infant and junior school children referred for the treatment of scoliosis and poor posture. Most individuals have a slight scoliosis because the spine is pulled out of alignment laterally

by the over-development of the muscular tone of one side of the body, depending on whether the individual is right or left-handed. The constant carrying of heavy weights by one or the other upper limbs is sometimes a contributory factor. One individual attending the clinic had been carrying a satchel to and from school weighing in the region of twelve pounds. Such an uneven distribution of load often results in a quite dramatic over-development of one side of the body. Organised bilateral exercises in the physical education classes in school should continue not only for postural improvement but also to encourage equal development of both sides of the body.

It appears at long last that some of the more extreme types of footwear are on the "fashion decline." The set-back heel is more sensible and more comfortable than its predecessor.

The following note is a simple, but effective, rule for parents to follow when buying children's shoes: —



The shoe is turned over with the sole uppermost and an imaginary line drawn from the middle of the heel, following a straight path above half the length of the shoe, then continuing in a gentle curve medially to bisect the arc of the toe. This will give the correct shape of shoe required. When children are fitted for new shoes, measurements are often taken while the child is in a sitting position. An incorrect fitting is recorded because in order to obtain the full spread of the foot the child must stand on the measure.

The special group from the Newman School have again continued their weekly visits to the swimming baths throughout the year. The group has increased in number, due to the inclusion of some of the smaller children. Once again the need for a special bath at school must be stressed. Twenty minutes a week in the water is by no means enough for these children and the time involved in travelling to the baths is very considerable.

The following table gives the details of the number of cases attending and total number of treatments given for the year :

Clinic	School children		Pre-school children	
	Cases	Treatments	Cases	Treatments
Ferham House 	62	644	6	212
Cranworth Road 	65	836	4	271
Newman School 	49	1,879	—	—
Totals 	176	3,359	10	483

Details of conditions treated are given in the following table. In some cases one child has attended for two or more conditions during the same period of treatment.

Asthma 	24
Bronchitis 	6
Other respiratory conditions 	4
General poor posture 	15
Scoliosis 	23
Kyphosis 	4
Flat feet 	43
Valgus deformity of ankles 	17
Pes cavus 	2
Hallux valgus 	2
Genu valgum 	4
Other lower leg conditions 	13
Talipes 	3
Athetosis 	8
Spastic haemiplegia 	9
Spastic quadriplegia 	3
Spastic diplegia 	2
Congenital dislocation of hip 	2
Anterior poliomyelitis 	8
Recent injuries 	6
Low back conditions 	6
Spastic paraplegia 	1

Spastic monoplegia	..	..	..	..	..	..	..	1
Hydrocephalus	..	..	..	..	..	..	..	1
Rheumatoid arthritis	..	..	..	..	..	..	..	1
Acne vulgaris	..	..	..	..	..	..	..	2
Cerebellar ataxia	..	..	..	..	..	..	..	2
								202

CHEST CLINIC

The Chest Consultant examined 32 new school children during the year, all referred by general practitioners. One case of respiratory tuberculosis was notified during 1964.

PAEDIATRIC SERVICE

As stated in previous reports, children are referred direct to the hospitals for examination and reports are received from the Consultant Paediatrician on all children seen by him. This arrangement continues very satisfactorily.

CHIROPODY SERVICE

REPORT OF THE CHIROPODIST.

The Chiropody Clinic was held on fifty-two sessions during the year, 402 children attended and received 857 treatments. Four pre-school children were also given one treatment each. An analysis of cases treated is shown below:

Defects	School children		Pre-school children	
	Cases	Attendances	Cases	Attendances
Verrucae	305	751	—	—
Corns	74	74	2	2
Foreign body in foot	5	5	—	—
Nail conditions	11	20	2	2
Bullae	7	7	—	—
Totals ..	402	857	4	4

Apart from verrucae, all other conditions requiring treatment at this clinic could have been prevented. For instance, ingrowing toe nails are always caused by incorrect cutting of the nails and the large number of children attending with corns is due to recent ridiculous foot fashions.

MINOR AILMENTS

A total of 2,384 minor ailments were dealt with during 1964, the figure for 1963 being 3,144.

There were two cases of scabies during the year.

One case of ringworm of the body received treatment during 1964.

CHILD GUIDANCE SERVICE

REPORT OF THE LOCUM PSYCHIATRIST.

In 1964 the work has continued in much the same pattern as in previous years. 58 new cases have been accepted for investigation and treatment, 39 boys and 19 girls. Several of these came from social problem families. 43 children were accepted for regular treatment by the Psychiatrist and 3 of these children had to be brought up to the clinic by School Welfare Officers.

There is no waiting list. Various interviews have taken place at the clinic with Probation Officers and School Welfare Officers. The Headteachers, Children's Officer and the Assistant Medical Officers have remained in close relationship with the clinic.

SOURCES OF REFERRAL.

School Medical Officers	..	..	..	..	..	..	17
Head Teachers	..	..	..	..	..	..	9
Hospitals	..	..	..	..	..	..	9
Parent	..	..	..	..	..	..	7
General Practitioners	..	..	..	..	..	..	6
Probation Officers	..	..	..	..	..	..	5
Children's Officer	..	..	..	..	..	..	2
Welfare Officer	..	..	..	..	..	..	2
Educational Psychologist	..	..	..	..	..	..	1
Total							58

The number of individual children who have attended is 219, all of school age.

One child was recommended for residential treatment, a girl so severely afflicted with epilepsy that she had to be taken into the Doncaster Gate Hospital as an emergency and later transferred to Nottingham Acute Psychiatric Hospital. She has now been recommended for a residential school for epileptics. She initially came to the Child Guidance Clinic from the Paediatrician.

29 cases were discharged in 1964.

The Deputy Superintendent Health Visitor has again carried out the home visiting and attended the clinic every week. Her co-operation has helped a great deal in elucidating the problems of the children and their parents. She made 88 home visits.

The number of clinic sessions was 146.

								School Children	Pre-school Children	Total
No. of individual children who have attended	..	..	..	..	..	..	..	219	—	219
No. of attendances made to see:										
(a) Psychiatrist	..	..	..	..	..	..	..	253	—	253
(b) Psychologist	..	..	..	..	..	..	..	90	—	90
								—	—	—
								343	—	343
								—	—	—
No. of individual parents who have attended	..	..	..	..	..	..	..	196	—	196
No. of attendances made to see:										
(a) Psychiatrist	..	..	..	..	..	..	..	217	—	217
(b) Psychologist	..	..	..	..	..	..	..	29	—	29
								—	—	—
								246	—	246
								—	—	—
No. of new cases referred in 1964	..	..	..	..	..	..	..	58	—	58
No. of new cases seen by Psychiatrist	..	..	..	..	..	..	..	47	—	47
No. of new cases taken on for regular treatment by Psychiatrist							..	43	—	43
No. of cases discharged	..	..	..	..	..	..	..	29	—	29
No. recommended for residential treatment	..	..	..	..	..	..	..	2	—	2
No. of home visits by Social Worker	..	..	..	..	..	..	..	—	—	88
No. of clinic sessions held by Psychiatrist	..	..	..	..	..	..	..	—	—	146

One girl, on becoming 16 years of age, was referred to the Mental Health Department and saw the consultant responsible for subnormal patients, owing to instability and noisy behaviour. One boy, who has made two different suicidal attempts, has also been referred to the Mental Health Department for care as he is unsettled in his home environment and is also addicted to changing his work. These referrals close the gap between Child Guidance and the adult psychiatric clinic.

DENTAL SERVICE

REPORT OF THE PRINCIPAL DENTAL OFFICER.

During 1964 the Rotherham Local Authority Dental Clinics have had a full complement of staff, i.e. six full time dentists. Mr. Parsons left on the 18th April, 1964, and was succeeded by Mr. Lofthouse on the 20th April, 1964. Three other enquiries were received during the year from qualified dental surgeons wishing to join the school service, but since we had no vacancy in Rotherham, these people were referred to other Authorities who subsequently engaged them. There seems evidence that young dentists are seriously considering entering school dental work rather than private practice under the National Health Service, General Dental Service. The more favourable conditions in the school service compensate for the somewhat higher financial return obtainable in private practice. Like many other public dental officers I have some knowledge of life in practice and would list the following as among the "more favourable conditions" mentioned above — the school dental surgeon has no responsibility for providing surgery premises, maintaining equipment and working materials or engaging and paying other staff; he has greater clinical freedom than under the National Health Service, General Dental Service Regulations and the surgery hours are slightly shorter; facilities for attending professional conferences and refresher courses are easier for the public dental officer; holidays and absence due to sickness, both with pay, must make a single-handed young private practitioner very envious of his counter-part in the school service. Perhaps these points, if brought to the notice of final year dental students, would improve the recruitment rate still further.

The school dental service and the private practitioner service of the National Health Service in an area can work harmoniously together and be complementary to each other rather than in competition. The great aim is that as many children as possible of school leaving age leave with a sound and healthy dentition. The school dental surgeons are statutorily empowered to inspect every child attending a state-aided school in their area and this should be done at least once each year, even if treatment cannot be offered to all those requiring it, for the parents are then aware that their children need dental attention and can take steps to obtain it from a private dentist. In Rotherham a routine arrival inspection is done in every school and many children attend the clinics for routine six — or even four-monthly examinations and treatment is available for every one who desires it. The Local Authority may also play a larger part in dental health education than the General Dental Service. Literature on dental health is given out at the clinics and the dentists explain to mothers and the patients not only what they are doing at that visit but also what further treatment is required.

Dental health education is an extremely slow process even under the most favourable conditions, the chief of which are routine annual school dental inspections of all the children in the area and the availability of treatment to those requiring it. It is

hoped to exhibit models, etc., in the schools during 1965 at about the same time as the dental inspections but anything more ambitious, no matter how arresting and striking a scheme it may be, is of little permanent use if it is found that the treatment advised cannot be obtained, either from the school clinics or the private practitioners. The appreciation of dental health, which is an index of the success of dental health education in an area is also closely related to the acceptance rate of dental treatment—when this is measured for the **entire** school population and not just from selected groups.

The care of the teeth is primarily the responsibility of the parents, who nowadays have equal opportunities of learning from the usual modern educative media of the written word and the spoken ones of health visitors and other social workers and those of the films and television. When the child is of school age and attending a state-aided school he has a routine dental examination and a notification is given to the parent of any treatment required. In Rotherham a detachable part of this notice can be signed by the parent, returned to the Headteacher and an appointment made for treatment at the clinic. Some thirty years ago one Headmaster insisted on the return of all these slips either accepting treatment or giving some good reason for not doing so. In consequence of the “gentle pressure” thus put on them, the boys in that school had, generally speaking, much better teeth than the average and when they graduated to the secondary modern or grammar schools one could, for the succeeding few years, at the dental inspection of these schools, pick out the boys who had previously attended this particular primary school. No doubt the general level of dental care has greatly improved since those days, for a variety of reasons, but this illustrates how very valuable the co-operation of the teacher is, in any scheme connected with children. I should again like to thank the teaching profession in Rotherham for the help they give to the dental clinics.

There are, of course, many factors which affect the condition of the teeth, such as a correct diet, especially of the mother; avoidance of decay-causing sticky sweets; brushing of the teeth and gums, especially last thing at night; proper nasal breathing and if possible the drinking of water containing one part per million of fluoride ions. This concentration occurs naturally in some areas and is known to help in forming a decay-resisting enamel. To add fluoride to the water in areas which were deficient has been advocated for over a quarter of a century but has not been done because it was said to have possible ill-effects in other parts of the body, which were not noticed in those areas in which fluoride occurred naturally in the water! Anyhow dental decay seems to be generally accepted as a normal feature of so-called civilisation and only when the cumulative ill-effects of inadequately chewed food become apparent is the patient said to be suffering a disease. The effect on the teeth of fluoridation of the water supplies will not be apparent for some years, since it is the forming teeth which are chiefly affected and the milk dentition is largely calcified before birth, while the first permanent molar which appears in the mouth about six years of age begins to calcify at birth. I shall not therefore be able to observe the good effects myself

although having advocated fluoridation for about thirty-five years—which is further support to the view that dental health education is an uphill and very slow job.

The co-ordination of individual Local Authority dental schemes into one public dental service has improved during the past two years and the visit of Mr. J. G. Potter, a dental officer of the Ministry of Health and the Department of Education and Science, for two days to Rotherham in December was most interesting and helpful, at least to the local dental staff. It is expected that these visits will be repeated annually so that there will be a closer liaison between the Ministry and the Local Authority dental surgeons than formerly. Mr. Potter's visit in 1964 was particularly useful in view of the new clinic which is being built at Ferham House and which it is hoped will be in use before the end of 1965. This new clinic will be fitted out with the most modern dental equipment, in four surgeries, but it must be remembered that this very satisfactory state of affairs is only transitory, since new models and designs are constantly being produced — not necessarily better or even as good as the old — just newer!

Considerably more statistical details are now required to be kept by the Local Authority, which collectively should prove useful and indicate trends or changes in dental disease and treatment among children. It is obvious that nowadays many more teeth are filled than, say, ten years ago, both in the school service and the General Dental Service of the National Health Service and that the ratio of teeth extracted to teeth filled has been completely reversed, at least among the younger population.

I should like to thank the Health and Education Committee for giving me the opportunity of attending the British Dental Association annual meeting each year, for this gives an ideal chance to exchange views with other Local Authority or private dentists, in addition to the scientific papers and demonstrations. More post-graduate refresher courses are being arranged by the British Dental Association and the Society of Medical Officers of Health in conjunction with the teaching hospitals, though it is often difficult to obtain a place on these, since the numbers are limited. The one-day meetings of Chief Dental Officers from Lancashire and Yorkshire held at six-monthly intervals alternatively in Manchester and Wakefield prove interesting and useful and all such meetings and conferences cannot help but be beneficial to the school dental service as a whole and in individual areas.

At a dental inspection it is usual to mark the result for each child as "sound," "sound at present" or "referred for treatment"—"the sound at present" classification covers, for instance, children who have milk teeth decayed but which are due to be lost in some months' time and which keep erupting second teeth in their proper place and if not troublesome may be left alone, or other children have carious six-year-old molars which have drifted forward and so will require extraction for orthodontic reasons, even if they do not ache, at around ten to eleven years of age, but which in a child of eight or nine years may be left for him to chew with for some time longer. Thus, this "sound at present" group represent the difference between those "requiring treatment" and those "referred for treatment" and it will be obvious that while in

infants and junior departments there may be quite a large number who are unsound but not referred for treatment, in the senior schools, among the older age groups especially, anybody who requires treatment is referred and advised to get attention as soon as possible.

In these statistical tables a mouth in which one small filling is needed is counted the same as one which is neglected and has gross sepsis present—in other words requiring treatment gives no indication of the amount of treatment necessary to restore dental fitness. There is noticeably more conservative work done in the mouths of children attending the grammar schools (be it by the Local Authority or private dentists) than in those of other children of similar ages. Of the fifteen years old and over at the Rotherham High School and Grammar School, 189 children were sound out of 579 inspected or 32.5 per cent., mostly as the result of treatment rather than immune to dental caries ; while from the other senior schools in the town, 1,197 children were seen at fifteen years plus and only 155 were sound, or 12.9 per cent. This shows that dental health education is easier with some people than others and indicates where the greater part of our efforts in this subject should be directed.

The orthodontic service of the Local Authority continues satisfactorily. The record cards of the patients under treatment are reviewed about every three months, so that those who lapse in attending at the clinics are soon noted. They are given another appointment by post and if this is not kept they are listed as “discontinued treatment.” The total figures of orthodontic treatment summarised are 489 patients treated during the year, 247 being new in 1964 and 242 continuing treatment begun in 1963. 152 completed courses of treatment, 231 are continuing during 1965 and 106 who started treatment discontinued it of their own accord. This 21.7 per cent of lapsed treatment is better than in 1963 and on nearly 500 patients may be considered reasonable. Selecting patients who will persevere with orthodontic appliances requires quite a lot of experience, for sometimes quite unpromising patients turn out to be very conscientious in wearing their plates which others, and their parents, who one would expect to be good patients are just the reverse. A child cannot be debarred the chance of having its teeth straightened just because he may not complete treatment but on the other hand a non co-operative child (or parent) cannot expect a satisfactory result if the appliance is not worn as instructed. This percentage of lapsed orthodontic treatments is another facet of dental health education but it will be a long time before the percentage of those lapsing, of those requiring orthodontic treatment (the above 21.7 per cent was of those requesting treatment) is even as low as 20 per cent.

The exact details of treatment during 1964 can be seen in the various tables appended and this report should be read in conjunction with that relating to the dental treatment of the patients referred from the maternity and child welfare clinics.

Details of the denture work done and the types of orthodontic appliances made is listed below:

Technician's half-day sessions	..	..	..	..	480
Assistant technician's half-day sessions	..	..	..	..	492
Full upper and lower dentures	..	..	Maternity	..	52
Full upper and part lower dentures	..	..	Maternity	..	24
			Schools	..	4
			Pre-school	..	4
Full upper or full lower dentures	..	..	Maternity	..	11
			Schools	..	1
			Pre-school	..	1
Part upper and part lower dentures	..	..	Maternity	..	30
			Schools	..	6
Part dentures	..	..	Maternity	..	12
			Schools	..	110
			Pre-school	..	1
Relines and repairs to dentures	..	..	Maternity	..	3
			Schools	..	32
Jacket or post crowns	..	..	Maternity	..	1
			Schools	..	20
Inlays	..	..	Schools	..	16
No. of orthodontic appliances made (fixed and removable)	..	..	Schools	..	507
Fixed appliances — Johnson twin arch	..	..	..	..	1
Lower lingual bow	..	..	..	..	12
Local pin and tube	..	..	..	..	5
Inclined planes	..	..	..	..	6
Removable appliances — Oral screen	..	..	..	..	1
Schwartz plate	..	..	..	..	91
Norwegian plate	..	..	..	..	3
Badock screw plate	..	..	..	..	8
Finger spring plate	..	..	..	..	129
Retention plates	..	..	..	..	22
Robert's retrators	..	..	..	..	6
Canine retraction plates	..	..	..	..	55
Modified Jackson plates	..	..	..	..	43
Chin cap	..	..	..	..	2
Apron spring plates	..	..	..	..	22
Lateral arm plates	..	..	..	..	1
Tongue barrier plates..	..	..	..	..	7
Sved plates	..	..	..	..	5
Y plates	..	..	..	..	3
Landin screw plates	..	..	..	..	76

The following table shows the details of the treatment given at the different clinics :

Clinic	Total atten- dances	No. of indiv- iduals treat- ed	Extractions		Fillings				Anaesthetics		Other opera- tions	No. of patients sup- plied with dentures
					Perm. teeth		Temp. teeth					
			Perm. teeth	Temp. teeth	No. of fill- ings	No. of teeth filled	No. of fill- ings	No. of teeth filled	Local	Gen- eral		
Cranworth Road ...	7297	2333	1194	2359	2867	2423	288	256	1101	1492	3830	63
Ferham House	9149	2863	1724	2863	3032	2646	317	286	1314	1732	5403	106
Total 1964 ..	16446	5196	2918	5222	5899	5069	605	542	2415	3224	9233	169
Total 1963 ..	14410	5341	3309	5006	4705	4016	326	296	2055	3626	7408	208

The following table gives details of treatment for the different groups of patients :

Group	Total attendances	No. of individuals treated	Extractions		Fillings				Anaesthetics		Other operations	No. of patients supplied with dentures
					Perm. teeth		Temp. teeth		Local	General		
			Perm. teeth	Temp. teeth	No. of fillings	No. of teeth filled	No. of fillings	No. of teeth filled				
School children ..	15260	4650	2452	4672	5718	4904	568	509	2298	2879	8429	89
Pre-school children ..	484	343	—	549	—	—	37	33	1	259	206	4
Maternity ..	702	203	466	1	181	165	—	—	116	86	598	76
Total 1964 ..	16446	5196	2918	5222	5899	5069	605	542	2415	3224	9233	169
Total 1963 ..	14410	5341	3309	5006	4705	4016	326	296	2055	3626	7408	208

						1964	1963
Number of children x-rayed .. ..	..	..	..	..	..	606	496
Number of x-ray films taken .. ..	..	..	..	..	..	1065	1006
Number of maternity patients x-rayed ..	..	..	..	..	..	10	7
Number of x-ray films taken .. ..	..	..	..	..	..	12	7
Number of pre-school children x-rayed ..	..	..	..	..	..	6	1
Number of x-ray films taken .. ..	..	..	..	..	..	6	1

Table showing the results of routine inspections in age groups and of the 15 year olds at the different secondary schools:

AGE —	5	6	7	8	9	To- tal 5-9	10	11	12	13	14	To- tal 10- 14	15+	15+		
														High and Grammar	Oakwood	Other secondary schools
Inspected	652	1067	1138	1269	1260	5386	1090	1052	1098	1147	1228	5615	1796	579	213	1004
Sound	269	310	213	215	154	1161	133	139	185	190	189	836	346	189	52	105
Percentage Sound	41.3	29.0	18.7	16.9	12.2	21.5	12.2	13.2	16.8	16.5	15.5	14.8	19.2	32.6	24.4	10.4
Sound at present	153	351	335	384	290	1513	157	109	59	34	22	381	23	5	1	17
Referred for Treatment	230	406	590	670	816	2712	800	804	854	923	1017	4398	1427	385	160	882
Percentage Referred	35.3	37.1	51.8	52.8	64.7	50.3	73.4	76.4	78.2	80.5	82.8	78.3	79.4	66.5	75.1	87.7

HANDICAPPED PUPILS

The ascertainment and care of handicapped children residing within the County Borough continues within the framework of the Education Act, 1944, and the School Health Service and Handicapped Pupils Regulations, 1953.

The following table shows the number of handicapped pupils of the various categories on the register at 31st December, 1964:

	In Residential Special Schools	In Day Special Schools	In Ordinary Day Schools	Not at school	Total
Blind	8	—	—	—	8
Partially sighted	—	3	1	—	4
Deaf	9	—	—	—	9
Partially hearing	—	5	6	—	11
Educationally sub-normal	7	101	37	—	145
Epileptic	—	1	—	—	1
Maladjusted	4	16	4	—	24
Physically handicapped ...	1	38	6	—	45
Speech defects	—	3	85	—	88
Delicate	1	61	—	—	62
Multiple defects	2	1	—	—	3

BLIND PUPILS.

Two boys and two girls attend the Sheffield School for Blind Children, two boys being newly admitted during 1964. One boy and one girl attends the Royal Normal College for the Blind, Shrewsbury, and one boy attends Condover Hall School, Shrewsbury. One boy was transferred from the Sheffield School for the Blind to Henshaws School for the Blind, Manchester, during 1964.

PARTIALLY SIGHTED CHILDREN.

Three partially sighted children attend the Newman School, Rotherham.

DEAF PUPILS.

Five children attend the Yorkshire Residential School for the Deaf, Doncaster, two boys and two girls attend the Maud Maxfield School for the Deaf, Sheffield.

PARTIALLY HEARING PUPILS.

Five children attend the Newman School, Rotherham, and six children are attending ordinary schools. Eleven children wear hearing aids.

EDUCATIONALLY SUB-NORMAL PUPILS.

As in previous years, children brought forward by Head Teachers and School Medical Officers as requiring ascertainment, together with those recommended for review, were examined during the year. 90 such children were examined and the following recommendations made :

	1964	1963
Special residential school for E.S.N. pupils	—	1
Special day school for E.S.N. pupils	20	22
Special class for retarded pupils in ordinary day school	21	11
Further observation in ordinary day school	14	11
Remain at special day school	7	3
Reported to Local Authority as unsuitable for education at school	7	5
Examined prior to leaving special school—informal supervision recommended	6	10
Examined prior to leaving special day school—no supervision recommended	5	12
Recommended for transfer from special day school to ordinary school ..	1	—
Referred to Child Guidance Clinic	1	3
Recommended for Newman School	4	1
Decision deferred	4	6

Four boys attend the Rossington Hall Special School for Educationally Sub-Normal Pupils, Nr. Doncaster, one boy attends Crowthorne School, Edgworth, Bolton. One boy continues to attend Hilton Grange School, Old Bramhope, Nr. Leeds, and one girl remains at Camphill House School, Aberdeen. One girl attends the Newman School.

ABBEY DAY SCHOOL FOR EDUCATIONALLY SUB-NORMAL PUPILS

In January, 1964, the total number of pupils on the roll of the Abbey School was 100. The same number was on the roll at the end of December, 1964.

During the year 15 pupils, 5 girls and 10 boys, left and there were 15 new admissions, 8 girls and 7 boys.

Of the 5 girls who left, 2 had reached their 16th birthday, one left at 15 years after mental reassessment and suitable employment promised, one was transferred to a secondary modern school and one to the Junior Training Centre.

Of the 10 boys who left, 5 had reached their 16th birthday, 4 left at 15 years after mental reassessment and suitable employment promised, and one was transferred to a residential school.

The general health of the pupils continues to improve.

Plans are in hand for the building of the new Abbey School and it is hoped that accommodation for educationally sub-normal children in 5—7 year age group will be included.

EPILEPTIC PUPILS.

One boy is still in attendance at the Newman School, Rotherham.

MALADJUSTED PUPILS.

Three boys are still in attendance at the William Henry Smith School, Brighouse, and nine boys and seven girls were on the register at the Newman School, Rotherham, at the end of the year.

PHYSICALLY HANDICAPPED PUPILS.

One girl continues at the Welburn Hall School, Kirbymoorside, and one boy at the Hesley Hall Special School, Tickhill.

Eighteen boys and twenty girls remained on the register of the Newman School, Rotherham, at the end of the year.

DELICATE PUPILS.

One boy was in Wharfedale Children's Hospital, during the year and one boy, admitted to Ingleborough Hall School, Clapham, was later transferred to Netherside Hall School, Skipton-in-Craven.

The number of delicate pupils remaining on the register at the Newman School, Rotherham, at the end of the year was 36 boys and 26 girls.

NEWMAN SCHOOL

The following table records details of admissions and discharges during 1964:

	Epileptic		Delicate		Physic'y handic'd		Partially sighted		Partially hearing		Mal-adjusted		Speech		E.S.N.		Total
	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	
Admitted 1964	—	—	7	3	4	4	—	—	—	1	4	2	2	—	—	—	27
Discharged 1964	—	—	18	13	2	3	—	—	—	2	—	—	—	—	—	—	38
Remaining on register at year end	1	—	36	26	18	20	3	—	3	2	9	7	2	1	—	1	129

An analysis of the categories of handicapped children attending the school is given below and compared with 1963:

	31-12-64	31-12-63
Delicate	62	82
Physically Handicapped	38	34
Maladjusted	16	12
Partially Hearing	5	4
Partially Sighted	3	3
Speech Defect	3	1
Educationally Subnormal	1	1
Epileptic	1	1
	<hr/>	<hr/>
Total ..	129	138
	<hr/>	<hr/>

For the first time in the history of the school, less than 50 per cent of its pupils were classified as “delicate.” A compensating change has been the increase in mal-adjusted children and those with speech defects. Many children admitted are now classified with more than one handicap. This results partly from improved treatment of certain conditions previously fatal in infancy, and partly from an increased awareness of the psychological effects and disturbed family relationships which almost inevitably accompany physical handicaps.

A full-time welfare assistant was appointed during the year to help feed and dress some of the severely handicapped children and to attend to their toilet needs. Arrangements have been completed to provide children who are considerably overweight with a special reducing diet when necessary. Excess weight often throws an additional strain on other physical disabilities.

More definite proposals are now being made about a small hydrotherapy pool. Other building requirements are better provision for the physiotherapy, the boxing-in of the open corridor and the provision of ramps to facilitate the passage of wheel chairs to the hall and art room, and at the main entrance.

The present emphasis at the school is on widening the educational opportunities offered to these children and to fit them for the difficult transitional stage between school and established employment. It is hoped in the near future to introduce a form of medical report, based on comprehensive functional assessment, which can be made available to the Youth Employment Officer.

HOME TUITION

No child was receiving home tuition at the end of the year.

SPEECH THERAPY SERVICE

REPORT OF THE SPEECH THERAPIST.

The Speech Therapy Service in the Borough was resumed in March, 1964.

During the year a number of children have been discharged due to failure to keep appointments. This emphasises the need for parental co-operation if speech therapy is to be of maximum benefit. Parents must have sufficient concern for their children first of all to bring them to the clinic and continue bringing them if regular treatment is considered necessary, and secondly to accept and act upon the advice given to them.

Weekly treatment sessions, each of half a day, have been carried out at both Newman School and Abbey School, Junior Department, during term time. There has been a gradual increase in the number of children with speech defects at the Newman School. It is hoped that in the near future it will be possible to increase the number of speech therapy sessions held at the school. Thanks are due to the staff of both Newman and Abbey Schools for their valuable co-operation and help during the year.

CASES AND ATTENDANCES.					School Children	Pre-school Children	Adults	Total
Total number of cases attending from previous years ..					94	—	—	94
Total number of new cases referred					39	9	3	51
Total number of attendances					948	107	12	1067
Total number cases discharged					45	—	1	46
Total number of school visits					—	—	—	50

CLASSIFICATION OF DEFECTS TREATED

Dyslalia:								
Multiple—more than one sound					70	6	1	77
Simple—one sound					2	—	—	2
Rhotacism					3	—	—	3
Sigmatism—lateral					6	—	—	6
interdental					9	—	—	9
nasal					1	—	—	1
Autistic					1	—	—	1
Cleft Palate					1	—	—	1
Hypernasality					1	—	—	1
Dyseneia—articulation defect due to hearing loss					2	—	—	2
Stammer					21	2	—	23
Stammer and dyslalia					2	—	—	2
Dysphonia					—	—	3	3
Dysphonia and dyslalia					1	—	—	1
Dysarthria					6	—	—	6
Dysarthria and hearing loss					1	—	—	1
Other					1	—	—	1
Failed to attend, therefore no diagnosis					5	—	—	5

DETAILS OF DISCHARGES

Refused to keep any appointments					6	—	—	6
Failed to keep further appointments					7	—	—	7
Left school					1	—	—	1
Parents refuse treatment					1	—	—	1
Left district					1	—	—	1
Attending other speech therapists					2	—	—	2
Speech normal					23	—	1	24
Maximum possible improvement					4	—	—	4

INFECTIOUS DISEASES, IMMUNISATION AND B.C.G. VACCINATION

The appended table gives the numbers of the common infectious diseases in children between the ages of 5 and 15 years and shows the quarterly distribution of the cases. The totals for all ages are also given.

Disease	Cases occurring in 1964				Total 5 to 15 years	Total all ages
	1st quarter	2nd quarter	3rd quarter	4th quarter		
Acute encephalitis :						
Infective	-	-	-	-	-	-
Post infectious	-	-	-	-	-	-
Acute poliomyelitis :						
Paralytic	-	-	-	-	-	-
Non-paralytic	-	-	-	-	-	-
Diphtheria	-	-	-	-	-	-
Dysentery	-	-	-	4	4	43
Encephalitis lethargica	-	-	-	-	-	-
Erysipelas	-	-	-	-	-	2
Food poisoning	-	-	1	-	1	3
Measles	2	12	42	206	262	720
Meningococcal infection	-	-	-	-	-	1
Pneumonia	-	-	-	1	1	27
Scarlet fever	9	11	8	25	53	95
Typhoid and paratyphoid fevers	-	-	-	-	-	-
Whooping cough	1	2	2	4	9	47
Tuberculosis :						
Respiratory	1	-	-	-	1	23
Other forms	-	-	-	-	-	5

DIPHTHERIA IMMUNISATION.

During the year, 60 school children received primary immunisation and 505 received booster injections.

At the end of the year 11,006 children between the ages of 5 and 14 years had been immunised. Of these, 4,572 had been immunised or received booster doses during the past five years.

No case of diphtheria in school children has been reported in the County Borough since March, 1952.

B.C.G. VACCINATION.

During the year 1964 B.C.G. vaccination was offered to all 13-year-old children. The following table gives the results:

Number of eligible children	1,311
Total consents received	1,120
Acceptance rate	85·4 per cent
Number of positive reactors to tuberculin testing	160
Number of non-reactors to tuberculin testing	725
Percentage of positive reactors	18·0 per cent
Number of children given B.C.G.	725
Total number of absentees	183

CHILDREN'S HOMES AND BOARDED-OUT CHILDREN

MEDICAL RESPONSIBILITY.

All children are medically examined by a school medical officer on admission to and discharge from the Children's Homes. A certificate of fitness is issued to the Children's Officer in respect of any child who is to be boarded-out. A private medical practitioner continues to be responsible for the general medical services in respect of all the children.

126 children were seen during the year for periodic medical inspection and 143 examinations were made. Treatments were advised where necessary.

Three children were admitted to Rotherham Hospital, two to King Edward VII Hospital, Sheffield, and one to the Fulwood Annexe of the Sheffield Children's Hospital, during the year.

The general health of the children continues to be satisfactory.

BOARDED-OUT CHILDREN.

57 boarded-out children were examined during 1964.

Defects were accorded appropriate treatment where necessary.

One child was admitted to Moorgate General Hospital, Rotherham, one to City General Hospital, Sheffield, one to the Sheffield Children's Hospital and one to the Fulwood Annexe of the Sheffield Children's Hospital, during the year.

CHILDREN AND YOUNG PERSONS ACT

43 children were examined during the year prior to admission to a remand home or approved school.

EMPLOYMENT OF CHILDREN

During the year 55 boys and 10 girls were granted certificates of fitness for employment. The figures for 1963 were 60 and 2 respectively.

COLLEGE ENTRANTS

In 1964, 61 candidates for admission to various training colleges and 22 candidates applying for employment as teachers, were examined by school medical officers. All candidates were found to be medically fit.

SCHOOL JOURNEYS

During 1964, 281 children were examined prior to taking part in school journeys.

CLINICS AND TREATMENT CENTRES

The following is a list of the school clinics and treatment centres provided, together with the sessional times: —

Address of clinic and sessions held	Times of sessions
FERHAM HOUSE CLINIC, Kimberworth Road, Rotherham.	
Minor ailment, general inspection and treatment.	Mondays, Wednesdays and Fridays, 9.0 a.m. to 12.30 p.m. Medical sessions—Mondays.
Ophthalmic.	Specialist's session — Tuesdays, 9.0 a.m. to 12.30 p.m. Nurses re-inspection—as required.
Ear, nose and throat.	Specialist's session—Mondays, 2.0 p.m. to 5.0 p.m. Nurses treatment sessions — Mondays, Tuesdays, Wednesdays and Fridays, 2.0 to 5.30 p.m.
Dental.	Mondays to Fridays, 9.0 a.m. to 12.30 p.m. and 2.0 to 5.30 p.m.; Saturdays, 9.0 a.m. to 12.0 noon.
Child guidance.	Psychiatrist—Wednesdays, 9.0 a.m. to 12.30 p.m. Thursdays, 9.0 a.m. to 12.30 p.m. and 2.0 to 5.30 p.m. Educational Psychologist—Wednesdays, 9.0 a.m. to 12.30 p.m. Thursdays, 9.0 a.m. to 12.30 p.m. and 2.0 to 5.30 p.m. Additional sessions arranged as required.
Chiropody.	Alternate Fridays, 9.0 a.m. to 12.30 p.m.
Speech therapy.	Mondays, 9.0 a.m. to 12.15 p.m. and 1.45 to 5.0 p.m. Wednesdays, 2.0 to 5.0 p.m. Thursdays, 9.0 a.m. to 12.15 p.m. and 1.45 to 5.0 p.m. Fridays, 9.0 a.m. to 12.15 p.m. and 1.45 to 5.0 p.m.
Physiotherapy.	Wednesdays, 9.30 a.m. to 12.30 p.m. Fridays, 9.0 a.m. to 10.30 a.m.
Immunisation.	Tuesdays, 2.0 to 4.30 p.m.
CRANWORTH ROAD CLINIC, Cranworth Road, Rotherham.	
Minor ailment, general inspection and treatment.	Mondays, Wednesdays and Fridays, 9.0 a.m. to 12.30 p.m. Medical sessions—Mondays.

Address of clinic and sessions held	Times of sessions
Ophthalmic.	Specialist's session — Saturdays, 9.0 a.m. to 12.0 noon. Nurses re-inspections—as required.
Physiotherapy.	Mondays, 9.0 a.m. to 12.30 p.m. Tuesdays, 9.0 to 10.0 a.m. Wednesdays, 9.0 to 9.30 a.m. Thursdays, 9.0 to 10.0 a.m. Fridays, 10.30 a.m. to 12.30 p.m.
Ear, nose and throat.	Specialist's session—Fridays, 10.45 a.m. to 12.30 p.m. Nurses treatment sessions—Mondays, Wednesdays and Fridays, 9.0 a.m. to 12.30 p.m. ; Saturdays, 9.0 a.m. to 12.0 noon.
Dental.	Mondays to Fridays, 9.0 a.m. to 12.30 p.m. and 2.0 to 5.30 p.m.; Saturdays, 9.0 a.m. to 12.0 noon.
Chiropody.	Alternate Fridays, 9.0 a.m. to 12.30 p.m.
Speech therapy.	Tuesdays, 1.45 to 5.0 p.m.
Immunisation.	Wednesdays, 2.0 to 4.15 p.m.

THORPE HESLEY CLINIC,
Thorpe Hesley Primary School,
Upper Wortley Road, Rotherham.

Minor ailment, general inspection and treatment.	Medical sessions — 2nd and 4th Tuesday in the month, 2.0 to 5.0 p.m. Nurses treatment sessions —Fridays, 2.0 to 5.0 p.m.
Immunisation.	2nd and 4th Tuesday in the month, 2.0 to 5.0 p.m.
Speech therapy.	Fridays, 10.15 a.m. to 12.15 p.m.

GREASBROUGH CLINIC,
Public Hall, Greasbrough,
Rotherham.

Minor ailment, general inspection and treatment.	Medical sessions—1st and 3rd Wednesday in the month, 2.0 to 5.0 p.m. Nurses treatment sessions —Wednesdays, 2.0 to 5.0 p.m.
Immunisation.	1st and 3rd Wednesday in the month, 2.0 to 5.0 p.m.

BLACKBURN CLINIC,
Blackburn Primary School,
Baring Road,
Blackburn, Rotherham.

Minor ailment, general inspection and treatment.	Medical Sessions—2nd and 4th Wednesday in the month, 2.0 to 5.0 p.m. Nurses treatment sessions—Wednesdays, 2.0 to 5.0 p.m.
Immunisation.	2nd and 4th Wednesday in the month, 2.0 to 5.0 p.m.

Address of clinic
and sessions held

Times of sessions

HIGH GREAVE CLINIC,
High Greave Primary School,
High Greave Road,
East Herringthorpe, Rotherham.

Minor ailment,
general inspection
and treatment.

Nurses treatment sessions—Mondays and Fridays,
9.0 a.m. to 12.0 noon.

NEWMAN SCHOOL
Whiston, Rotherham.

Minor ailment,
general inspection
and treatment.
Immunisation.
Physiotherapy.
Speech therapy

Medical sessions—as required.
Nurses treatment sessions—Mondays to Fridays,
9.0 a.m. to 12.0 noon and 1.30 to 4.0 p.m.
As required—at medical sessions.
Tuesdays and Thursdays, 10.0 a.m. to 12.30 p.m.
Wednesdays, 9.0 a.m. to 12.30 p.m.

ABBAY SCHOOL
Junior Department,
Scholes, Rotherham

Minor ailment,
general inspection
and treatment.
Speech therapy.

Medical sessions—alternate Thursdays 2.0 to 4.0
p.m. Nurses treatment sessions—Mondays, 2.0
p.m. to 3.30 p.m.
Tuesdays, 9.0 a.m. to 12.15 p.m.

Senior Department,
Kimberworth, Rotherham.

Minor ailment,
general inspection
and treatment.

Medical sessions—alternate Thursdays, 2.0 to 4.0
p.m. Nurses treatment sessions—Tuesdays, 2.0
to 4.0 p.m.

ST. JOHN'S GREEN CLINIC,
Kimberworth Park,
Rotherham.

Minor ailment,
general inspection
and treatment.
Immunisation.

Medical sessions—Wednesdays, 9.0 a.m. to 12.30
p.m. Nurses treatment sessions—Wednesdays,
9.0 a.m. to 12.30 p.m.
As required—at medical sessions.

SCHOOL MEALS SERVICE

ORGANISER OF SCHOOL MEALS: MISS N. TAYLOR.

The following analysis shows the number of school dinners consumed during each quarter of the year. It is interesting to note that the yearly total of dinners is steadily on the increase, this year's total being the highest ever produced in Rotherham.

1964	Number of Meals
January-March	444,207
April-June	434,216
July-September	278,215
October-December	437,855
	<hr/>
	1,594,493
	<hr/>

JUNIOR AND ADULT TRAINING CENTRES.

1964	Number of Meals
January-March	4,544
April-June	4,753
July-September	2,778
October-December	4,283
	<hr/>
	16,358
	<hr/>

The following table shows the number of meals supplied since 1954:

1954—1,095,016	1960—1,288,816
1955—1,215,617	1961—1,348,906
1956—1,263,553	1962—1,401,488
1957—1,111,848	1963—1,525,101
1958—1,212,734	1964—1,594,493
1959—1,242,702	

The figures of actual attendance compared with the dinner numbers show that over the year 64 per cent of the children now have a school dinner.

1964	Average School attendance per day	Percentage of number on roll	Average Number of Meals per day	Percentage
September	13,449·0	92·5	8,381	62·32
October	13,439·8	92·0	8,928	66·43
November	13,387·3	91·6	8,649	64·61
December	13,202·5	90·3	8,380	63·47
Average	13,369·6	91·6	8,584	64·21
1963	13,439·3	91·2	8,526	63·44

In February of this year, the Central Kitchen at Canklow was closed. This marked the end of war-time feeding and was a task well done ; only people who have worked in these large central kitchens realise the toil and frustrations of preparing dinners by the thousand. Tribute is now paid to the three supervisors who toiled with these centres over a period of 21 years.

The progression of school meals over the years shows a great deal of improvement in both kitchen and dining facilities. There are now 20 kitchens with dining rooms. Spurley Hey Secondary School Kitchen was opened in February. This is a 650 meals kitchen, preparing dinners for Spurley Hey School and Coleridge Road Junior and Infant School.

Kimberworth Secondary School Kitchen was opened in November, this is a 550 meals kitchen preparing meals for the Kimberworth Secondary School and the Kimberworth Infants School.

Wingfield Secondary School was prepared in December ready for opening in January. Schools that were served by the Canklow Centre are now receiving dinners from the kitchens situated nearest to them.

Details of dinners prepared at the various schools are as follows :

School	Average Daily Number
Grammar School	340
High School—serving St. Ann’s Junior Mixed and Infants’	725
Park Street Kitchen—serving Alma Road Junior Mixed and Infants’ } Abbey Junior School	450
Broom Valley—serving South Grove School	500
Oakwood Kitchen—serving Sitwell Junior Mixed, South Grove (Wellgate) Adult Training Centre }	850
Redscope—serving Roughwood Junior Mixed and Infants’	760
Thorpe Hesley School	300
Newman Special School	115
Herringthorpe—serving St. Mary’s R.C.	495
Badsley Moor Lane—serving Doncaster Road Junior Mixed and Infants’ } Arnold Road Nursery School	610
Ferham Kitchen—serving Meadowhall Road School } Junior Training Centre	470
High Greave School Kitchen	215
Thornhill Kitchen—serving St. Bede’s Junior Mixed and Infants’ } Abbey Senior School	700
Blackburn School Kitchen	145
Old Hall Secondary School	335
Greasbrough School Kitchen	220
St. Bernard’s R.C. School Kitchen	375
Spurley Hey Secondary School—serving Coleridge Road Junior Mixed and Infants’	720
Kimberworth Secondary School—serving Kimberworth Infants’	670

PHYSICAL EDUCATION

ORGANISERS: MISS G. ELSWORTH, MR. J. BAILEY.

1964 can be regarded as the dawn of a new era in Physical Education in secondary schools. Work in the primary schools has continued normally throughout the year.

GYMNASTICS.

The Spring Term saw the new gymnasium, sports' hall and changing rooms at Spurley Hey School brought into use, together with the hope of improved facilities at Kimberworth School and the new Wingfield School. With this in view, it was thought proper to raise the status of Physical Education as a subject in certain cases, by offering increased allowances, resulting in satisfactory replacements of staff for September, where needed.

A demonstration of gymnastics was given by Spurley Hey Boys' School, in July, to afford other teachers in the Authority an opportunity to see the building and its apparatus.

SWIMMING.

The programme of blocked swimming sessions for the five primary schools who took part in the inaugural scheme was continued for a second year until July. From September, ten further groups from five other schools took up this option, and this programme was in being up to December.

The total of Education Committee Certificates awarded to primary and secondary schools was:

Grade	I	II	III	IV	V
	1,227	459	123	4	4

In April, a lecture demonstration on the Mouth to Mouth method of Resuscitation was given to primary school teachers who accompany children to the baths.

The South Yorkshire Physical Education Association arranged a lecture demonstration on Drownproofing in October which proved most interesting.

78 awards of the Royal Life Saving Society were gained during the year.

Free swimming vouchers were awarded to 1 girl and 30 boys.

ORGANISED GAMES AND ATHLETICS.

Herringthorpe playing fields continued to be used regularly for football by South Grove School and for many inter-school matches. The stadium was used each Saturday for athletic meetings by Spurley Hey School and by individual schools for their annual meetings. The Rotherham and District Schools Athletic Association meeting was also held there. The girls from South Grove School continued to have the use of facilities for hockey and tennis at Oakwood School.

Tennis courts at Oakwood and St. Bernard's Schools were re-surfaced.

St. Bernard's School field was in full use for both winter and summer games and drainage was undertaken in the spring.

The newly prepared field at Kimberworth School was seeded in the late spring and the "Dri-pla" hard surface area brought into use in September. With a good spell of autumn weather, this area proved invaluable, especially as part of the girls' playground area which had always been used for netball, was built upon. Netball games, hockey and football skill training have all taken place on the area.

The Foljambe Field, the off-site area for Spurley Hey School, and the pavilion were nearing completion by the end of the year.

The fields at Wingfield school were levelled and prepared and hard surface playground and tennis/netball areas were laid.

Holiday coaching courses were again held, with tennis for boys and girls at Whitsuntide and football for boys before Christmas.

OUTDOOR PURSUITS.

Boys from Old Hall School continued to work for the Bronze and Silver awards of the Duke of Edinburgh's Scheme, taking expeditions involving light weight camping and field work, whilst those from Park Street School again enjoyed a standing camp in Derbyshire, at the beginning of the summer holiday.

Oakwood Boys' School held their annual standing camp, centred this year on Brittany in the summer, following a successful football tour in Holland at Easter.

YOUTH COMMITTEE.

A variety of physical activities attracted young people, who took part in leagues and competitions for soccer, cricket, five-a-side football and table tennis, and a team competed in the Swimming Gala organised by the Yorkshire Youth Organisations' Sports Association.

Other recreational activities included physical education and keep-fit classes, rugby, basketball, badminton, tennis, athletics and dancing.

Once again there was considerable interest in judo among both boys and girls.

As part of their training for Silver and Bronze Certificates and Badges, boys taking part in the Duke of Edinburgh's Award Scheme engaged in expeditions involving light-weight camping, field work and athletics.

Two youth clubs enjoyed a joint residential week-end school at Birchfield, Hope, Derbyshire, where members took part in outdoor pursuits such as walking, rock climbing and rural studies.

The following coaching groups were organised during the year :

- | | |
|--------------------------|--------------------------------------|
| 1. Association football. | 5. Swimming and life saving. |
| 2. Athletics | 6. Tennis. |
| 3. Judo. | 7. Duke of Edinburgh's Award Scheme. |
| 4. Rugby football. | |

MINISTRY OF EDUCATION MEDICAL INSPECTION AND TREATMENT RETURNS

Year ended 31st December, 1964.

PART 1

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A—PERIODIC MEDICAL INSPECTIONS.

Age Groups Inspected. (Year of birth)	No. of Pupils Inspected.	Physical Condition of Pupils Inspected	
		Satisfactory	Unsatisfactory
1960 and later	54	54	—
1959	493	493	—
1958	704	704	—
1957	95	94	1
1956	63	63	—
1955	307	307	—
1954	626	626	—
1953	110	110	—
1952	52	52	—
1951	53	53	—
1950	350	350	—
1949 and earlier	473	473	—
Total ..	3380	3379	1

Percentage satisfactory .. 99·97
Percentage unsatisfactory .. ·03

TABLE A—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS.

Age Groups Inspected (Year of birth)	For defective vision (excluding squint)	For any of the other conditions recorded in Part 11	Total individual pupils
1960 and later	3	12	12
1959	34	122	128
1958	48	133	163
1957	7	25	28
1956	7	18	22
1955	59	87	133
1954	112	133	216
1953	19	38	50
1952	9	15	22
1951	13	11	22
1950	55	56	99
1949 and earlier	96	88	158
Total ..	462	738	1053

TABLE B—OTHER INSPECTIONS.

Number of special inspections	6663
Number of re-inspections	10783
	<hr/>
Total	17446
	<hr/>

TABLE C—INFESTATION WITH VERMIN.

Total number of examinations in the school by the school nurses or other authorised persons	29150
Total number of individual pupils found to be infested	2895
Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	243
Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	82

PART II

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION

TABLE A—PERIODIC INSPECTIONS.

Defect or disease	PERIODIC INSPECTIONS						TOTAL (including all other age groups inspected)	
	Entrants		Leavers		Others		Re- quiring treat- ment	Re- quiring observa- tion
	Re- quiring treat- ment	Re- quiring observa- tion	Re- quiring treat- ment	Re- quiring observa- tion	Re- quiring treat- ment	Re- quiring observa- tion		
Skin	25	51	41	44	47	50	113	145
Eyes—Vision	85	156	151	88	226	200	462	444
Squint	24	8	4	2	12	16	40	26
Other	4	4	2	4	7	6	13	14
Ears—Hearing	28	29	6	6	37	16	71	51
Otitis media	24	22	2	3	15	13	41	38
Other	5	3	5	—	14	3	24	6
Nose and throat	99	105	15	23	58	53	172	181
Speech	6	13	—	4	4	20	10	37
Lymphatic glands	25	118	5	13	19	48	49	179
Heart	1	24	2	5	3	18	6	47
Lungs	20	38	1	15	24	47	45	100
Developmental—								
Hernia	3	13	—	3	1	11	4	27
Other	6	40	9	31	17	39	32	110
Orthopaedic—								
Posture	9	7	3	9	26	9	38	25
Feet	14	17	15	10	31	17	60	44
Other... ..	13	37	12	26	30	20	55	83
Nervous system—								
Epilepsy	2	1	4	1	1	1	7	3
Other	1	5	3	6	5	17	9	28
Psychological—								
Development	2	38	1	4	5	43	8	85
Stability	1	10	4	1	4	10	9	21
Abdomen	7	8	2	6	4	20	13	34
Other	26	50	13	15	18	36	57	101

TABLE B—SPECIAL INSPECTIONS.

Defect or Disease	SPECIAL INSPECTIONS	
	Requiring treatment	Requiring observation
Skin	1253	118
Eyes—Vision	1465	851
Squint	32	27
Other	162	21
Ears—Hearing	222	170
Otitis media... ..	71	13
Other	159	14
Nose and throat	524	191
Speech	117	40
Lymphatic glands	36	106
Heart	1	34
Lungs	48	69
Developmental—		
Hernia	—	6
Other	11	129
Orthopaedic—		
Posture	30	12
Feet	62	33
Other	156	85
Nervous system—		
Epilepsy	10	3
Other	4	24
Psychological—		
Development	7	26
Stability	7	17
Abdomen	34	33
Other	1287	436

PART III

TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS

(including Nursery and Special Schools)

TABLE A—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint ..	148
Errors of refraction (including squint)	676
Total	824
Number of pupils for whom spectacles were :	
Prescribed	562

TABLE B—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases known to have been dealt with
Received operative treatment :	
(a) for diseases of the ear	55
(b) for adenoids and chronic tonsillitis	151
(c) for other nose and throat conditions	46
Received other forms of treatment	418
Total	670
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1962	2
(b) in previous years	9

TABLE C—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Number of cases known to have been treated
Pupils treated at clinics or out-patient departments	124
Pupils treated at school for postural defects	25
Total	149

TABLE D—DISEASES OF THE SKIN (excluding uncleanness, for which see Table C of Part 1).

							Number of cases known to have been treated
Ringworm :	(1) Scalp	..	..	..	..	..	—
	(2) Body	..	..	..	..	..	1
Scabies	..	..	..	..	..	..	2
Impetigo	..	..	..	..	..	..	17
Other skin diseases	..	..	..	..	..	..	1155
Total							1175

TABLE E—CHILD GUIDANCE TREATMENT

			Number of cases known to have been treated
Number of pupils treated at child guidance clinics	..	..	219

TABLE F—SPEECH THERAPY.

			Number of cases known to have been treated
Number of pupils treated by speech therapist	..	..	133

TABLE G—OTHER TREATMENT GIVEN.

						Number of cases known to have been dealt with
Pupils with minor ailments	..	..	..	..	..	1076
Pupils who received convalescent treatment under School Health Service arrangements	..	..	..	..	..	302
Pupils who received B.C.G. vaccination..	..	..	..	..	..	725
Other treatments :						
Foot conditions	..	..	..	..	..	33
General condition	..	..	..	..	..	6
Bronchitis	..	..	..	..	..	28
Total						2170

FORM 28M

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

Number of pupils inspected by the Authority's dental officers :

Periodic inspections	..	..	..	..	..	..	..	..	13165
Specials	..	..	..	..	..	..	..	..	327
								Total	13492

(a) Dental and Orthodontic work:

Number found to require treatment	..	..	..	..	..	..	..	11099
Number offered treatment	..	..	..	..	..	..	..	9076
Number actually treated	..	..	..	..	..	..	..	4650

(b) Dental work (other than Orthodontic):

Attendances made by pupils for treatment	..	..	..	..	..	..	12347
Half-days devoted to inspection	..	..	..	..	..	..	104
treatment	..	..	..	..	..	..	1331
						Total	1435

Fillings : Permanent teeth	..	..	..	..	..	..	5718
Temporary teeth	..	..	..	..	..	..	568
						Total	6286

Number of teeth filled : Permanent teeth	..	..	..	..	..	4904
Temporary teeth	..	..	..	..	..	509
					Total	5413

Extractions : Permanent teeth	..	..	..	..	..	2452
Temporary teeth	..	..	..	..	..	4672
					Total	7124

Administration of general anaesthetics for extraction	2879
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Number of half days devoted to the administration of general anaesthetics by:

Dentists	..	..	..	..	..	..	405
Medical Practitioners	..	..	..	..	..	..	—
					Total	..	405

Number of pupils supplied with artificial dentures	89
--	----	----	----	----	----

Other operations :

Crowns	..	..	..	..	..	..	..	..	..	20
Inlays	..	..	..	..	..	..	..	..	..	16
Other treatment	..	..	..	..	..	..	..	..	..	8393
Total ..										<u>8429</u>

(c) Orthodontics:

Number of attendances made by pupils for orthodontic treatment	..	..	2913
Half days devoted to orthodontic treatment	..	..	410
Cases commenced during the year	..	..	247
Cases brought forward from the previous year	..	..	242
Cases completed during the year	..	..	152
Cases discontinued during the year	..	..	106
Number of pupils treated by means of appliances	..	..	485
Number of removable appliances fitted	..	..	456
Number of fixed appliances fitted	24
Cases referred to and treatment by Hospital Orthodontists	125

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